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TRANSLATOR'S PREFACE.

The increasing prevalence of Typhoid Fever in this country, and particularly in our large cities, will, we believe, give at this time, a peculiar interest to the translation of the work of M. Rapou on that subject.

Its thorough pathology and symptomatology, its clear therapeutic indications, and the just and original views of the author on Fever in general, render it the most valuable Homœopathic Treatise on Typhoid Fever that yet exists in the language; while to a portion, at least, of the profession, its systematic exposition of the mode of using water in this disease will be an additional recommendation.

We cannot, however, agree with our author in the disparagement of certain Hygienic measures to which he alludes; and, although forced to dissent from his views in this particular, we feel that in offering the present translation of his work to American Homœopathists, we render them a service that they will not be slow to appreciate.

June, 1853.

TYPHOID FEVER,

AND ITS

HOMŒOPATHIC TREATMENT.

We observe in all times morbid tendencies which impress a peculiar character upon the majority of diseases, and which themselves constitute especial maladies. Under the action of causes as yet little known, these morbid tendencies acquire a high degree of intensity, become epidemics, which sweep off whole populations, and leave for a long time after them an endemic disposition not less fatal.

It is the *medical genius*, the *quid divinum* of Hippocrates, of which it is infinitely important to the man of science to appreciate the true character, under penalty of being reduced to palliatives, inefficacious and often even dangerous.

At this day, under the influence of debilitating causes, moral and physical, fevers absolutely inflammatory, have become very rare. The majority

acquire in their course something abnormal, pernicious, and malignant, which prevents the salutary crisis, reduces in an extraordinary manner the strength, and attacks the sources of life like the most deleterious miasms.

There is now hardly an acute disease which does not assume, often in a feeble degree, but always more or less marked, this ataxic, adynamic character, this *quid divinum;* it is the medical constitution of this epoch.

Broussaism, for having ignored it, has finished by falling into the most complete discredit, not, however, without making innumerable victims. Although better appreciated by the Eclectic physicians, they have not combated this morbid tendency by any more efficacious means. The antiseptic, tonic, revulsive medications have all shown themselves equally powerless. What indeed could these rational means effect against a cause of a special nature? The only resource was in the employment of special medicinal agents which had a specific relation with the disease. Through these means alone was it possible to attack it directly, and to triumph over it in a majority of cases.

This is what an already extended experience has superabundantly proved. The object of this Memoir is to make known this specific method, called

Homœopathic, applied to the treatment of diseases which are as the type of the present medical constitution, and which have been for a few years designated by the name of *Typhoid Fevers*. We hope that conscientious Allopathic physicians, who all deplore the powerlessness of their art in the treatment of these malignant fevers, will not refuse to study and apply this method, whose efficacy, established upon a great number of observations, is every day confirmed by new successes.

There exists a great variety of typhoid, putrid, adynamic, pernicious, and ataxic affections. It is not our intention to treat of these divers morbid states, but only of that which has been so well defined by Doctors Bretonneau and Louis,* and which is characterized by an intestinal exanthema, followed by ulceration.

The constant existence of this intestinal exanthema in subjects attacked with one of the species called Putrid or malignant by the ancients, and Typhoid by the moderns, is an important discovery, which helps us to appreciate the real nature of the disease, and indicates the special treatment required.

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* Récherches Anatomiques, Pathologiques et Thérapeutiques sur la Fièvre Typhoide. 2e edit., Paris, 1841, 2 vol. 8vo.

Up to this time the indications of the treatment, in acute diseases, have been drawn from the sanguineous reaction which almost always accompanies them, and which is called Fever. This phenomenon has always been so badly interpreted, the prejudices to which it has given birth are so numerous and so deeply rooted, that they easily explain the multitude of false modes of treatment, one after another, resorted to by the old schools of medicine. Let us pause a moment upon that point of pathology which relates to the object of this memoir.

The respiratory action and the beatings of the heart measure regularly the course of life: but how constantly are these modified by a multitude of obstacles! The very elements which sustain life, give rise to a thousand causes which tend to destroy it. They are resisted by the reverse of physical force, not by inertia but by reaction.

The natural stimulants are soon transformed into irritants. The vital force reacts; all its energy is exerted; the beatings of the heart are accelerated, the respiratory action is hurried, the circulation is increased; fever is produced. Here is the primordial fact, the great law of pathology. If this is misunderstood, the whole of the therapeutics must be bad.

Fever is then an element common to all diseases

where the organism still possesses its reactive power. It is a general state, from which we cannot draw any essential indication, springing out of the particular nature of the morbid affection.

It is, nevertheless, from this common element that we have heretofore drawn these indications.

Fundamental error, from which has sprung all the vicious methods which have constituted, and still constitute the art of healing. It is established in the schools that three quarters of all diseases are fevers; instead of that three quarters of the whole number of diseases present the symptom of fever.

They have made a classification of fevers. They have ranged upon the same line the most dissimilar diseases, having nothing in common but the febrile reaction.

There is the Inflammatory fever (as if fever was not essentially inflammatory). There are fevers which are not so, such as the Nervous fevers, which have only the appearance of febrile reaction; Putrid fevers, which commence with the reaction, and soon offer a complete absence of this symptom. Where do we find two words which clash, which contrast more, than these two, *typhoid fever?—Typhoid*, which signifies a state of stupor; and *fever*, a state of excitation. The fact is that there is no fever, if it is not in the beginning, or when the special

typhoid element is slightly marked, as we see in certain cases of meningitis and of gastro-enteritis, with which it is complicated.

They have not only committed the fault of giving the fever an importance which does not belong to it as a source of indication, they have completed the error and its fatal consequences, by mistaking the nature of this morbid phenomenon. It would be impossible to enumerate here the diverse opinions upon the nature of Fever which have run their course in the schools. Beside they are all comprised in the following: fever, according to some, was a pathological entity, a disease *sui generis*, generally terminating in the alteration of the humors, and the prostration of the strength. It should be combated by febrifuges, then by tonics, by antispasmodics; substances which commonly aggravate the evil in augmenting the irritation.

This notion of fever predominated in the schools until the time of Broussais. This physician perceived its false and dangerous character, and knew how to take advantage of it to obtain credit for an opinion diametrically opposed, not less false and more fruitful in mischievous results.

According to Broussais, fever does not constitute a special morbid state, a pathological entity, but is only a symptom; and this symptom in-

variably denotes a phlogosis, an internal inflammation, a vital excitation, an increase of force which must be diminished, repressed, combated by diet, by emollients, and by sanguineous emissions. He inveighs with an inexhaustible spirit against those purgers, those polypharmacists, those incendiaries who stir up the fire of the inflammation and redouble the fever by their irritating medicines.

Good sense, simple observation, aided by this powerful critic, took prompt effect, at least in France, upon this old system of drugging; but Broussais wished in his turn to construct a medical edifice, and based it upon a definition of fever as erroneous as that he had combated.

According to him, as I have already said, fever is the result of inflammation; it is the symptom which reveals it, which declares its presence. The greater the fever, the more intense the inflammation, and as this consists always in an excessive excitement, and an augmentation of vital force, the fever presents always the indication of an antiphlogistic treatment, that is to say, of a debilitation by diet, emollients, and leechings. Who can ever estimate the quantity of blood shed, the amount of evil caused by this deplorable system. Would to heaven the polypharmacy of other times had not been de-

throned! Its fatal effects were individual, and little appreciable upon the masses. The patients, it is true, did not all die a natural death, but the convalescent were re-established in the fullness of their strength. But life was attacked in its source, and the generations debilitated by the murderous treatment springing from the opinion of Broussais upon the nature of fever. A few years of experience were sufficient to discredit this theory.

Practitioners, now without principles, or fixed opinions of any sort, act at a venture in the treatment of fevers. They employ the most diverse means, in accordance with the diversity of their ideas, without any rule; they practice eclecticism according to the rhetoricians of the faculty of Paris, which is, in reality, the negation of all positive medicine. We see them, at the beginning of a typhoid fever, when the reaction is vigorous, open a vein, to accelerate the depression of strength, aggravate the ataxy, and then prescribe stimulants, pretended tonics, which the enfeebled organism can no longer support, and which achieve its destruction. Others benumb the salutary reaction by opiates. There are some who overwhelm and annihilate it by enormous revulsions. We might fill a large volume with an enumeration of the various treatments to which the old school of medi-

cine has subjected typhoid fever. Who can count the cases which would have arrived at a favorable termination of themselves, but for the blind manœuvering of these charlatans interfering with the salutary and delicate operations of nature?

Fever never constitutes, of itself, a disease, it is a symptom common to the majority of diseases, a symptom more or less predominant, which forms of itself, in certain cases, the whole of the appreciable phenomena, in traumatic fever for example.

Fever is to the organism what inertia is to matter; it is its manner of resisting the causes of destruction. Fever is a reaction of life, an essentially salutary manifestation which it is sometimes necessary to moderate, but never decidedly combat. A free and complete fever promises a prompt and radical cure. When the fever is wanting, the reaction is also wanting, and with it all hope of re-establishment (I speak here of acute diseases). What more difficult to dissipate than those morbid states, where the fever appears from time to time incomplete, light and transient? states so improperly designated Nervous fevers, and those in which we observe those abrupt, violent, convulsive efforts of a reaction powerless to triumph over a profound physical or moral alteration.

Fever is the basis of the prognostic; it is to the

diagnostic of a secondary use and furnishes very little indication for the treatment. To attempt to make it serve to classify diseases, as has been done up to the present time, is strangely to misjudge upon the very first elements of pathology, and give rise to all sorts of bad modes of treatment. There are, then, no ataxic, pernicious, mucous, putrid, typhoid fevers, but special morbid states, too often without this salutary phenomenon of fever, and which require, to be treated with success, a profonnd knowledge of their especial natures.

Intermittent fevers should be considered as neuroses, accompanied by febrile reaction. Joseph Frank had already said, "the greatest care must be taken to distinguish intermittent from continuous fevers. They are absolutely different. It is impossible to give a general theory which will apply to both." Still further we will go, and say, that it is not possible to comprise in the same category all the intermittent fevers; some springing from a miasmatic poison, others from a purely dynamic modification; the one yielding to quinine, the other aggravated by it. (A) There are some which resemble ataxic fevers; they have the malignity and the promptly fatal termination; some are almost confounded with neuralgies. Intermittence, like fever, is a phenomenon, a state of being common to a

great number of morbid states: to explain these diseases by fever and intermittents is to completely mistake their nature, and to submit them all to the uniform and often inefficacious treatment of anti-periodics.

Diseases manifest themselves by internal or external symptoms, and it is not by one of these that they must be judged but by their ensemble. It is not to say that the symptoms have all the same value, that they are all of the same rank. Far from this, there are some which are characteristic, and the union of a small number of these suffices to the practitioner to appreciate exactly the nature of the disease.

We will say that, of all the morbid phenomena, the one to which most importance has been attached as a guide in practice, fever is one of those which possess the least. We have already indicated the grievous consequences of this error; we insist no more on this subject.

Let us now occupy ourselves with an examination into the nature of typhoid fever, by rejecting altogether the idea of fever, and in submitting to an attentive examination all those special symptoms which characterize it; we shall then deduce from this study the proper treatment; an exact, scientific treatment established upon positive principles, of

which the experience of every day proves the efficacy.

Typhoid fever has become the scourge of modern populations; composed of the plague and the small-pox, of which it assumes the double character, mitigated, diminished as the debilitation of our temperaments admits. It is in the air that we respire; it makes its daily victims and nothing can protect us from its attacks; since it is impossible to avoid the fatigues of body and mind which evidently predispose to it. By a mysterious and terrible affinity, it attaches itself, in preference, to the flower and fullness of life, from fifteen to thirty-five. Redoubling at times in intensity, it becomes epidemic, and carries off from numerous cities and townships the greatest part of their young and virile population. It is commonly in the rural districts that it makes its ravages; in the large cities it seems to choose its victims with more discretion; but it makes in them its permanent home.

It is suspended, like the sword of Damocles, over every family where the children, having arrived at the fullness of their physical and intellectual development, are the joy and the hope of their parents; and the place where the greater number of young men go to finish their studies, the city of Paris, predisposes particularly to typhoid fever. It also

inspires a very legitimate fear in men of the world, in the fathers of families, and we can hardly treat too much in detail whatever relates to its medical history; it is therefore that I have thought proper to precede the exposition of its treatment, by diverse considerations upon the nature and character of this disease.

Typhoid fever forms a part of a class of natural diseases in which the febrile reaction is irregular, sometimes extremely intense, and promptly arrested, subject to a thousand aberrations, as if the vital forces obeyed a toxic cause, secret and powerful; diseases in which the whole organism is affected, in which, at the end of a certain preparatory period, are manifested either upon the skin, or upon the mucous membrane, an appreciable pathological product: eruption, ganglion, ulcer or flux; diseases in which the blood suffers a profound alteration, a veritable decomposition, as has been established by several observers, and above all by Professor Andral. It divides itself naturally into two groups: into Eruptive fevers, and those which are not eruptive. *The first comprises the Small-pox, Measles, Scarlatina, Urticaria febrilis, Sudor anglicus, Anthrax. The second

* We make use of the word Fever to accommodate ourselves to the received language; for it would be necessary to create a new expression to give a just idea of the nature of these diseases.

comprises the Typhoid fever, the Typhus and its varieties, the Epidemic Dysentery, the Plague, the Yellow-fever, the Asiatic Cholera; and there will probably enter into one or the other of these two classes, several other morbid affections of which we have not yet been able to appreciate the true character.

All these diseases, let us hasten to say, are the result of an infection, of a poisoning of the organism, of a profound alteration of the animal substance, by a miasm or a virus. As to the nature of these infectious agents which still escape the investigations of science, it imports us little to know, since their different effects permit us, according to the Homœopathic law, to find the proper remedies with which to combat them.

From this point of view, we discover the true character of typhoid fever, and the treatment which it calls for. And this manner of viewing it, is not the result of a preconceived theory, nor the explanation of an isolated fact, applied to many others by analogy, but springs from a general positive observation, from this time forward acquired to science.

It cannot be denied that the character common to the affections we have just mentioned, forms them into a natural group, and establishes between them the most intimate relations.

Each one of these characters equally concurs to

demonstrate the existence of an infecting cause. All these diseases are contagious, epidemic, or susceptible of becoming so. They attack suddenly the most robust persons, enjoying perfect health, and living in accordance with the most salutary hygiene. They present all the most serious general symptoms, and a profound alteration of the humors, before even producing any appreciable local lesion; we often remark a depression, sometimes a complete prostration, often an aberration of the febrile reaction which seems to be controlled by a more powerful morbid force. This deleterious agent controls, masters, crushes. It will destroy in a few days the most vigorous constitution, it will sometimes spare the most delicate.

All depends upon an idiosyncrasy, upon individual susceptibility to receive the impression of the deleterious agent. From the instant that the morbid leaven operates, the physiological laws are entirely changed. The vital reaction ceases to act as a safeguard to the organism. We may second the curative efforts of nature, but we must not count upon their efficiency. The rational medication should cede the first place to the employment of specific medicines addressed directly to the evil, attacking it in its inmost essence, to enfeeble it, as in the cholera and eruptive fevers; to destroy it entirely, as in the

pernicious fevers. The employment of the specific mode called Homœopathy, is then, I repeat, an imperative duty. It is only a criminal indifference, ignorance, or bad faith, which can dispense with it.

The effects of poisons, of the virus, venoms upon the organism, expose to us the nature of these diseases. We are struck with the resemblance there is between the plague and the bite of the viper; between the yellow-fever and the bite of the *lachesis trigonocephalus* (rattlesnake); between the sting of certain insects and the anthrax; between the vaccine and the small-pox; between poisoning with white hellebore, or preparations of copper and the cholera; between the effects of poison by small doses of arsenic and typhoid fever.

The close affinity of these miasmatic diseases, and the intimate relations which unite the two natural groups into which we have divided them, manifest themselves in a thousand ways. Thus in exanthematic fevers, the eruption is sometimes insignificant, and we often see in typhoid fevers, the skin covered with vesicles or papulæ, and in the cholera there is a constant alteration of Brunner's follicles.

The confluent small-pox, and the typhus, offer a very similar lesion of the intestinal glands.*

* We have witnessed a case where the characteristics belonging to typhus and to small-pox were so mingled and combined, that

Typhoid fever and sweat often accompany cholera, as must have been observed during the epidemic of 1836 at Vienna, and in that which ravaged, in 1849, la Bourgogne and la Champagne. We could point out other resemblances, but these suffice to establish that there is a class of miasmatic diseases, of which typhoid fever forms a part. The inmost nature of these deleterious agents, as of all other agents, is unknown to us. The senses do not directly reveal to us their presence. We know them only by their effects; and the variety of these effects, in enabling us to distinguish the difference of their natures, indicates to us the proper toxical medicinal agent with which to combat them.

Let us now treat of one of these miasmatic affections, of Typhoid fever; of its causes, its symptoms, its progress, its varieties, and of the diverse circumstances which modify it.

I am about to expose these things in a few pages, as they shall present themselves to my observation. I do not purpose to write a treatise *ex professo*. I propose only to furnish the proper documents to establish an exact and complete treatment of this disease, which the Allopathic physicians blindly combat without rule, without method, and without success.

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the most skillful observer would not have been able to determine to which of these two affections it belonged.

Fatigue of body and mind, too long continued, and exhausting corporeal labor, at the age when the organism is being developed, are fruitful sources of typhoid fever, but they are accessory causes, and without action, if there does not exist a special disposition of the person, or of the medical constitution of the moment. At certain times this disease is not produced; and reigns at others without appreciable cause. It often manifests itself in persons previously in perfect health, and who had suffered no privation nor been guilty of any excess. Dr. Andral and several other practitioners have remarked that the sojourn in Paris, of strangers not yet acclimated, predisposes powerfully to this disease. We have made the same remark at Lyons. It may be observed in all great centres of population. It would appear that the typhoid miasm is the special product of the vitiation of the atmosphere by the concentrated emanations from assemblages of men, under certain conditions which we are not yet able to appreciate. Thus it is endemic in cities, and commonly only manifests itself under the epidemic form, among the rural populations; resembling in this, other miasmatic affections—plague, cholera, small pox, yellow fever, which reign endemically, in the neighborhood of their centres, the mouths of the Nile, of the Ganges, of the Missis-

sippi, and spread from these epidemically all over the face of the globe.

The virulent miasmatic affections have a special origin which is peculiar to them, and at which it is often difficult to arrive, but to which, one may always approximate, in studying the history of their development. None of them have that common origin which the majority of practitioners attribute to them. We have said several times, and we repeat it again, without an exact notion of specificity, it is impossible to treat it successfully. We fall into gross errors of diagnosis, of treatment, and even of hygiene. Happily these last are in no way pernicious, and the war upon insalubrity, commenced with such a flourish of trumpets by the medical societies, upon the appearance of any epidemic, the hygienic precautions enjoined, all this vain display of prescriptions has no other advantage than to conceal the powerlessness of their art. Experience has in vain demonstrated that there is no relation of cause and effect between the production, the development and the extension of these diseases and the filthiness of great cities, exhalations of sewers, infected lodgings, and dirty lanes; they persist always in blaming these bad hygienic conditions, which have nothing to do with them. The faculty points out the enemy; the municipality answers to

its call; they call meetings, appoint committees; they publish learned reports on the danger of miasms; they sweep, they paint, they ventilate; but the epidemic is not modified. It seeks and attacks its victims without distinction, in the palace, and in the small and unhealthy lodging; ravages the rich quarters with the large avenues, and sometimes spares the tortuous labyrinth crammed with a sickly population. Blinded by the absence of any exact ideas upon the specific nature of the disease, they hold the laws of hygiene responsible, if not for the production, at least for its development and aggravation. They propose to reach it with the rational treatment. But nature does not adapt itself to the theories of men; nothing is efficacious against these special affections, if it is not the specific method. But prejudice blinds them to facts; they continue to harangue on the subject of the hygienic precautions, and to hide behind doctoral phrases, the radical powerlessness of the ordinary treatment.

The majority of physicians maintain that typhoid fever is not contagious. This opinion is true, but not in an absolute sense. The disease, in the fullness of its development, in the typhus state, is evidently contagious. It is less so in proportion as it departs from this type, and we may well admit that

ordinary typhoid, as it has presented itself for several years past, is not contagious.

Age, as we have said above, has some influence upon the facility with which this disease is contracted. The most favorable time for its development, is from fifteen to thirty years; from fifty-five to seventy, it hardly ever presents itself; after seventy, the adynamic fevers appear, but they are not typhoic, the special intestinal lesion no longer exists.

This lesion, which characterizes typhoid fever, and belongs only to it, consists in a papulous red swelling of Peyer's glands, and Brunner's follicles, followed by ulceration. It is constant in well developed typhoid fever, as described by Drs. Louis and Chomel. This alteration of the tissues, is not the only one that we observe, several others are produced of which we are about to speak; for without exact ideas with regard to these lesions, it is impossible to properly appreciate the value of the symptoms, and consequently to choose judiciously the medicine with which to treat it.

In well characterized typhoid fever, the blood is altered, decomposed. It has lost its red color and fibrinous consistence. It is to this alteration of the blood must be attributed, in great part, the adynamy of these fevers, as also their ataxy; for the effica-

cious reaction not being effected, the curative efforts of nature are lost in disordered manifestations. From this decomposition of the blood, which renders it more fluid, arise those little nasal hemorrhages, from the commencement, and this much-to-be-dreaded, but happily very rare complication of intestinal hemorrhages.

In view of this impoverished blood, one shudders at the idea of the incalculable evil which must result from the antiphlogistic treatment applied to typhoid fever, especially during the first thirty years of this century. What a long and fatal experience was required to force the rationalism of the schools to abandon the lancet! (A.)

Another observation, not less important, results from an examination of this blood; it is that the buffy coat is not, as is said, a certain indication of a free inflammatory state; for we observe of the clots of blood obtained from typhoid subjects, that they are soft, dark, poor in fibrin and in hematosin. This white fibrinous covering always exists when the pulmonary tissue is seriously affected in this fever, and even when the prostration of strength is complete. There are still practitioners, who, after an inspection of this buffy coat, feel themselves justified in opening anew the vein, and thus destroying the last resources of an ebbing life.

From the putrid fluidity of the blood arises the *scorbutico-fuliginous* state of the mouth, observed in a great number of typhoid patients. From the mucous membrane oozes a black carbonized blood, which covers the teeth with a dark-brown coating.

This mechanical effusion is sometimes otherwise produced: the epithelium becomes dry — cracks; blood flows from these openings, coagulates on the surface, and forms crusts. We must not confound this dark coating of the tongue with the saburral browning, which takes place in certain typhoid fevers, and in all the adynamic fevers of old people.

It is rare that the pulmonary parenchyma is not altered: it presents all the degrees of lesion belonging to peripneumony. But there is one which especially belongs to typhoid fever: it is a soft reddish hepatization, similar to the tissue of the spleen in individuals dead of intermittent deleterious fever.

We find often sanguine effusions in the cavity of the pleuræ.

While among a great number of subjects no local symptoms reveal the existence of the most intense pulmonary lesions, among others we observe a very marked difficulty of breathing, without any lesion of the lungs being revealed by autopsy.

The typhoid state produces sometimes a very dark jaundice. It should not be attributed to bile, but to a special alteration of the blood, a phenomenon common to other miasmatic diseases.

The congestion of the parotid glands appears in certain cases, but always as an unfortunate complication; it is never a critical phenomenon.

There is no organic apparatus which presents, in typhoid fever, so much functional disorder as the nervous centres, and nevertheless, they present no appreciable lesion after death. Thus we see the most formidable cerebral symptoms disappear very promptly under the influence of a well-directed specific treatment.

The disorders of the hearing, of the sight, contraction or dilatation of the pupils, modifications of the sensibility of the skin, and of the caloricity, dissipate, in general, when the intestinal lesions which affected sympathetically the brain, disappear.

The stomach is rarely the seat of ulceration. It presents very often, in the great cul-de-sac, injections and ramollissement of the mucous membrane, but nothing special which can characterize this disease.

The duodenum is almost always exempt from alteration; we never find here ulceration of the follicles: special exanthema is localized in the small intestine.

Doctor Andral has sought in vain this exanthema in the intestines of individuals dead of other acute diseases. He has occasionally found a very unequal development of the follicles, but nothing resembling the typhoic exanthema.

It has been said that this exanthema had a regular course and phases similar to those of the small-pox. However, it often terminates in a different manner, by resolution or by ulceration.

We are able to testify to the cicatrization of the ulcers in the cases of persons dead by accident during convalescence.

The large intestine is commonly sound, with the exception of the cœcum, which is usually covered with a confluent eruption. But it is the special seat of a very abundant gaseous production, and almost always characterizes typhoid fever. Among many subjects, the distension of the colon by the gas, is so considerable, that this intestine is delineated through the abdominal parietes, drives back the diaphragm, and lodges at the epigastrium, and might be taken for the stomach. The cause of this disengagement of gas cannot be referred to the alterations of the colon, since it is in general less injured than the small intestine.

This special inflammation of the follicles, this typhoic exanthema is produced with the fever and

persists as long as it lasts. But we must remember that the evil is not there, that it is deeper; for we observe in this disease, as in all other miasmatic affections, that the organic lesion is hardly ever in proportion to the gravity of the symptomatic appareil.

The tongue presents here, more than in any other disease, very various modifications which have this peculiarity, that they do not relate to the state of the stomach, but to the typhoic affection. Those physicians who judge of the state of the digestive organs from an inspection of the tongue, often commit fatal errors. Thus a tongue dry and red upon the edges, does not indicate the employment of emollients and antiphlogistics; a purgative based upon a saburral tongue from the commencement of convalescence, and the diet in this case, would have a most grievous result. The tongue only furnishes us with indications upon the nature and degree of the typhoic affection. If the cerebral apparatus is particularly attacked, the tongue is red and quivering; if it is the lungs, it is saburral; if it is the abdomen, it becomes dry, black in the middle, red on the borders. These symptomatic relations are among the most constant, and the least deceptive.

Nausea and vomitings occur sometimes in the commencement, diminish as the evil augments, and

disappear when the adynamy is well established. If they appear during the last period, we may fear the existence of a peritonitis by perforation.

The bowels are almost always indolent; the patient does not complain of colic. A single symptom reveals the profound lesion of the intestinal tube; it is a sharp pain produced in the right fossa iliac in pressing upon it with the hand. If sensation is not entirely destroyed by stupor, the patient becomes agitated under this pressure, and makes a plaintive cry. The slight movement provoked by the touch upon the fossa iliac, and the insensibility to pressure of all the rest of the abdomen, is one of the characteristic signs which immediately denotes, to the experienced practitioner, the existence of typhoid fever.

There is a functional disorder of the intestines,—constipation or diarrhea. This last is more frequently observed at Paris than at Lyons,—here constipation is the ordinary state. In the commencement of the disease, the diarrhea is not serious; toward the end, and during convalescence, it is always an extremely unfavorable phenomenon, which springs from the non-cicatrization of the intestinal ulcers. We have remarked that the treatment of typhoid fevers, with constipation, was the most prompt and easy.

It has been said that the diarrhea was the indi-

cation of the irritation of the large intestine; it has been given as a sign of colitis, and pretended that if the lesions are limited to the small intestines, there is necessarily constipation. This is not so. Diarrhea, like most of the other phenomena, springs from the special typhoic ulceration. The large intestine has been found perfectly sound, in subjects who had had an abundant diarrhea until death; it is sufficient that the extremity of the small intestine should be affected to produce a relaxation.

The urine presents very constant modifications, and furnishes precious indications for determining the seriousness of the morbid state at its divers periods, and to direct with certainty the alimentary regimen during convalescence. There is no disease in which the examination of the urine is so essential, and nevertheless the majority of practitioners neglect it altogether; for my part, it is my compass, and it has never failed me. The pulse, the tongue, the aspect of the physiognomy may lead you into errors; the urine always faithfully indicates the true state of the patient. The urine of the night and that of the day, should be kept every day separately in goblets, in order to perfectly appreciate the shades of limpidity, and the nature of the deposit.

At the commencement of the disease, the urine is troubled, whitish, jumentous, and remains in the

vessel in this state without depositing. Soon after, when the disease is established, it becomes perfectly limpid, and of a natural color. For several days it does not seem to change; nevertheless, if we place the glass before a strong light, we remark a light mist on the upper part of the urine. The following day this cloud descends a little, always suspended in such a manner that the urine in the bottom of the glass, and that in the upper part are limpid, while the middle is cloudy, opaline, perfectly defined; in proportion as this cloud descends, we may argue that the disease approaches a favorable crisis.

As soon as the eneorema has touched the bottom of the glass, it changes its nature, and is transformed into a sandy deposit of a reddish gray, of which a part is attached to the sides of the vessel. By this sign we recognize the approaching cure, and may reassure the anxious relatives.

This deposit, which increases from day to day, becomes in general very abundant, sometimes attaining to a height of at least two inches in a champaign glass. It is then composed of a rosy powder, deposited upon a thick mucous bottom. From this moment we should give the patient food, broths and light porridges. When the deposit becomes again purely sandy, and begins to

diminish, the cure is assured. We should then, without loss of time, prescribe a tonic alimentation, roast meats, wine and water, nourishing porridges; if not, we arrest the salutary reaction at the most favorable moment for its development, and bring on a convalescence more dangerous than the original disease. The pulse becomes then quick and hurried; the cheeks colored; a little dry cough, or frequent thin stools, indicate the development of a passive pneumonia, or of a dysentery, through exhaustion. Good gravy soup is here the sovereign remedy.

I have no doubt that a great number of typhoid patients, progressing favorably toward a cure, in spite of allopathic treatment, have succumbed at the beginning of convalescence, victims of the diet and Broussaisien regimen. I have several examples of them. I shall always remember having been called to a little patient, reduced to the last degree of putrid adynamy, abandoned by his physicians, and having saved him by means of gravy soup, prescribed at my first visit.

It is the inspection of the urine which serves as a sure guide in the direction of the alimentary regimen, and enables us to avoid the danger of too much and too little. If it is red and clear, all alimentation should be suspended; if it becomes

pale, slightly troubled with a little deposit, the nourishment should be abundant; if the deposit is large we should be reserved.

I do not know if the changes in the urine occur, as I have indicated, in cases of typhoid fevers which have had a fatal termination. It is very probable that they remain limpid, or contain an eneorema. I had once occasion to remark this.

The pulse presents the greatest variations, sometimes slow, very slow, sometimes frequent, strong or feeble. However, it is generally frequent, especially in the evening. We should carefully distinguish between this frequency, and that which occurs when all the typhoid phenomena have disappeared. That which springs from a painful effort of convalescence, when the diet is too severe, and which disappears in proportion as the patient recovers his strength.

The functional disorders of the respiratory apparatus do not correspond to the gravity of lesions discovered by anatomy after death. Here, more than in any other disease, the profound alterations of the parenchyma spring up and are developed in a completely latent manner, and often the disorganization of the lungs is consummated before we have even suspected that it was injured. It is then important in these diseases, to auscultate and percuss often, for pneumonia may develop itself abruptly, and at

all periods. The experienced eye of the practi tioner should be able to recognize it by the following symptoms: a little dry cough, hurried and rather difficult breathing, acceleration of the pulse, which becomes miserable, the greatest prostration, vivid redness of the cheeks. This state of the lungs, presents the greatest analogy with the adynamic pneumonia of old people, and can only be distinguished by the ensemble of the other typhoic phenomena, which are wanting in this species of pneumonia.

The heat of the skin, like the pulse, presents a great variety. It is not in relation with the degree of intestinal irritation. We have observed, that a marked perturbation in the heat of the skin, a tingling sensation in some places, icy coldness in others (I do not speak of the extremities), indicates a participation of the encephalon or of its membranes in the typhoic irritation. The anomalies of caloricity appear to me one of the phenomena belonging to cerebral typhoid fever.

In a great number of subjects, the skin is covered with a variety of eruptions—petechiæ, vibices, sudaminæ, pustules, miliary, purpuræ, eruptions, and varioliform pimples. The petechiæ occupy little more than the trunk, rarely the top of the neck and the limbs. Andral has never seen any

upon the face or upon the limbs. I have, however, witnessed one case where the whole surface of the skin was covered with prominent papulæ.

The size of these spots varies from a very small flea-bite to that of a lentil. They are generally round, but are sometimes oval or elongated, and protrude in a manner quite appreciable to the touch though not so to the sight. They present several shades of color; of a lively rose when they show themselves, when the adynamic symptoms are not strongly marked, and take a livid or brownish hue as the stupor augments. At the moment when the spot appears, it seems generally its greatest development; it continues five or six days, and then begins to fade and disappear without leaving any trace. The petechial eruption is generally discrete, sometimes, however, it becomes confluent, and presents some analogy with the eruption in measles. The petechiæ often appear and disappear several times during the course of the disease. In the extreme adynamy produced by loss of blood, the petechiæ generally show themselves at once, fade and disappear in proportion as strength is recovered. We have talked of critical petechiæ. Andral has twice observed the disappearance of the petechiæ coincide with a very evident amelioration. I have never made a similar observation. I have remarked, on

the contrary, that the disease is serious in proportion as the petechiæ are numerous, that their quantity and extent correspond very nearly to the number and size of the intestinal ulcers.

The livid spots called vibices, seem to be only a variety of the petechial eruption; it is infinitely more rare.

An eruption not less constant and characteristic of typhoid fever, is that of the *Sudaminæ*. They are little aqueous bullæ, transparent, perfectly limpid, as dew drops which we think we can spread with the finger, and which nevertheless resist a very strong rubbing. The sudaminæ appear long after the papulæ, and toward the third period of the disease. They develop themselves upon the neck, not elsewhere, and by preference upon the sides of the neck. They are very ephemeral, succeed each other, and leave, in dissipating, little white pellicules. During the eruption of the sudaminæ the skin of the neck is dry, arid, and of a brownish color. We have observed one case of confluent sudaminæ, forming large vesicles, similar to fly-blisters.

In typhoid fever patients, the skin mortifies and ulcerates with remarkable facility in places where there has been a slight irritation. This circumstance renders the blisters so often prescribed by allopathic physicians in this disease, very dangerous (C.)

The skin of the typhoid patients, is almost always dry and pitchy. A real amelioration never manifests itself until after it has recovered its normal state. Perspiration is the critical phenomenon par excellence, it always announces a very speedy convalescence.

Such are the principal anatomical and functional alterations, presented by typhoid fever. Their appreciation, vain object of the lucubrations of the Allopathic schools, is of a great utility to the Homœopathic practitioner, who wishes to act with a knowledge of the cause, leaving the least possible chance for diagnostic errors, and to administer the remedies according to precise indications. With him, every symptom must be taken into consideration; upon their ensemble, upon their relative value, upon the order in which they are produced, depends the choice of his remedies. Of what importance are these things to the allopathists? they have voluminous treatises upon typhoid fever, terminating in some miserable pages consecrated to vague therapeutic prescriptions, quite as applicable to all other kinds of diseases. They give good descriptions, in these books, of Peyer's glands, of the intestinal ulcerations, the alterations of the blood, the ramollissement of the tissues. It is in their hospitals we go to study the anatomical lesions; it is

only in the Homœopathic clinics that we learn how to cure it.

Typhoid fever is not a disease which is always the same. It presents itself under a great number of forms, which may be referred to the three following types: cerebral typhoid, typhoid pneumonia, and abdominal typhus, corresponding to the predominance of the functional alterations of the brain, of the lungs, and of the intestines.

The disease, consisting in a general infection of the blood and of the tissues, leaves no function in the normal state. All are not, however, perverted in the same degree, and, according to the difference of the accidental causes, of age, of temperament, of a great number of circumstances, of which it is impossible to determine the influence, such or such an organic appareil is affected in a special manner, and its morbid phenomena control the ensemble of the other symptoms, giving a typhoic affection of a particular character. We find, then, a great variety in the fevers, and we should not know how to make a concise, exact, and complete description of them. The practice furnishes every day new cases, different from those observed heretofore, and having nothing in common with them, but the ataxy, the adynamy, and the eruption *sui generis* of the intestinal canal.

The appearance of typhoid fever often takes place in the most insidious manner. It requires an exquisite tact, the most consummate experience, to recognize always its existence from the first. It may present itself at first under the form of some local inflammation, of a gastritis, of a bronchitis, of an angina, etc., etc. We have seen it suddenly present itself, after a lumbago of short duration, or a violent inflammatory fever. In serious cases, the disease commences by a violent headache, with nausea and syncope. In general these are the forerunners: the patient feels ill at ease, without being able to describe what he experiences. He is tired; he sleeps badly; he has no appetite; he bleeds at the nose, a few drops of dark blood; his head is heavy; he has vertigo, ideas confused, trembling limbs; he feels an inclination to go to bed. The two first nights his sleep is troubled, his dreams painful. The next day, the patient no longer complains; he is slow to answer, but says, in a short tone, that he is well. The face is vultueuse; the eyes are brilliant and animated; the arteries beat; the pulse is full, large; the lips dry; the thirst ardent; the tongue whitish, marked with red points; the abdomen swollen; there is constipation; the urine is rare and dark.

From the third to the sixth day, the stupor

increases, the patient only answers, and with difficulty, the most pressing questions; but always in a sensible manner, and slowly. He stammers, the tongue trembles, it becomes dry and thick, and has a brownish coating. The bowels continue to swell, appear indolent, except in the right fossa iliac, where the patient complains of a severe pain, and shudders under the pressure of the hand upon it. The skin is dry and burning. We perceive here and there, upon the trunk, a few pale-red papulæ, of the form of very small lentils. Later, we observe on the neck an eruption of round, transparent, limpid vesicles, resembling dew drops, which disappear after about thirty-six or forty-eight hours, leaving small, whitish pellicles. Sometimes the sudaminæ are not appreciable, and we only observe a scurfy powder. The patient lies upon the back without movement. We remark only a clonic contraction of the fingers, and a twitching of the tendons of the fore-arm. The atmosphere of the chamber is impregnated with an odor *sui generis*, impossible to define, but by which the experienced practitioner immediately recognizes the presence of typhoid fever.

Toward this period, the disease begins to assume one of the three forms we have mentioned. If the brain is implicated, all the symptoms are controlled

by the disorder of this organ; so that one might imagine he had to deal with a cerebral fever: furor, convulsions, cries, singing, turgescence of the face, haggard eyes, dilated or contracted pupils, trembling, redness of the tongue, tension of the pulse, up to the moment of the general collapse which precedes the pangs of death.

If the lungs are in a special manner affected, we might easily confound this state with the adynamic pneumonia of old people.

A thick cough brings on at first a gelatinous expectoration, adhering to the vessel, of a pale-red color, which changes little by little to a brown tint, then of the color of wine dregs, then of the juice of prunes, and becomes fluid. The features of the face alter rapidly, the nose sharpens, the temples flatten, the pulse is filiform; life wanes rapidly, without any other appreciable reaction than a slight febrile movement in the evening, with a vivid redness and purple of the cheeks.

The abdominal form is the most frequent and the least dangerous. In this we do not see any new morbid phenomena added to the symptoms of the first period, which continues to develop itself progressively. The skin becomes more dry, and of a more burning heat. The pale-red papulæ become brown and multiply principally on the trunk. We

have observed them even on the hands. The stupor becomes complete; the patient replies to no question, and appears totally insensible. The lips are dry and dark, as well as the gums and tongue; the teeth are covered as if with a thick varnish; the bowels are swollen. Then a colliquative diarrhea ordinarily succeeds the tenacious constipation of the beginning.

We may comprise under these three principal morbid forms all the typhoid affections; but it would be impossible to describe all their varieties; beside, this exposition would have no practical utility. It is only important to know how to recognize the presence of the special infection; to distinguish from the commencement the typhoid affections from those which are not so. The following are some of the distinctive signs which will aid us in determining this. The inflammatory reaction of typhoid fever manifests itself at first with intensity, but soon gives place to a depression of strength. In simple acute diseases, it is the contrary which takes place; the excitement goes on increasing progressively until it reaches the climax. In typhoid fever the patient does not complain; he replies tardily, but in a prompt and vivacious manner; his eyes are brilliant, animated with a strange excitement, as in a fit of madness. In the simple

inflammatory affections, the patient is agitated, complains, looks and replies in a natural manner. We observe, that after a general febrile movement, the disease locates itself, leaving several of the organic appareils in their normal state. In typhoid fever, on the contrary, the entire economy is soon affected.

We do not see here, that ensemble of morbid phenomena, of a regular development, which belongs to inflammatory fevers; but the experienced eye of the physician very soon recognizes the functional disorder which the ancients designated by the name of ataxy. The look is animated but the features indicate stupor; the tongue is dry, arid, the skin burning, yet there is no thirst; the pulse variable, is large and slow, small and quick, without appreciable cause. A powerful morbid genius controls the vital reaction and subverts it at its will.

To distinguish the typhoid affection from that which is not so, from the commencement of its development, is one of the difficulties of the practice. We see every day physicians reputed intelligent and skillful mistake the character of this disease until it has arrived at one of its most advanced periods, and prescribe a homicidal medication, which they would have been very far from giving had they been able to appreciate the true nature of the disease.

Only a few days since, two children, school-fellows, fell ill, both complained of an indefinable malaise with pain, upon pressure upon the right fossa iliac. One of them, by the advice of his physician had leeches applied to this region, and died the next day. The other was to take a purgative. I was however called. The child was naturally of a lively disposition; I found him with the eye dull and gloomy, a dejected air, the skin yellow, the tongue coated, the pulse slow. He complained of general lassitude, confusion of the head, want of appetite, constipation; he had just lost by the nose a few drops of very dark blood. The bowels were painful to the touch in the right fossa iliæ. Under the influence of the appropriate medicines the disease ran through its regular periods in fifteen days. None of the characteristic phenomena were wanting—the tongue, dirty, became dry and wrinkled, the teeth and gums fuliginous. There were at first, diarrhea, stools abundant and fetid, then constipation, twitchings in the tendons of the fore-arm; four or five petechiæ upon the trunk. Toward the last period, a very transient eruption of the sudaminæ on the neck; skin dry and burning; pulse large, depressible, of a normal frequency; obstruction of the right lung, with a whistling mucous rattle. The urine, at first very clear, presented an eneorema

which descended little by little, and gave place to an abundant sandy deposit. The color was bright, and the responses slow. There lacked not one of the features which belong to abdominal typhoid fever. Nevertheless, the physician of the place, an old practitioner, well known, much esteemed, and learned withal, endeavored to persuade the relations, that the child had not had the shadow of a typhoid fever, but an insignificant morbid state, some gastric difficulty. He would have undoubtedly prescribed a purgative, or leeches, perhaps both.

Without doubt, also, the poor child would have shared the fate of his school-fellow, or the disease, aggravated by this ill-timed treatment, would have conducted him to the borders of the tomb, through liniments, plasters, blisters, drugs, potions of all sorts, which allopathic practice, without true resources, accumulates upon its patients, without rule and without measure. What a contrast does this medication offer to the specific treatment, which proceeds always in a regular manner, according to the nature of the symptoms, sparing the vital forces, gently soliciting the reaction, and conducting the disease through the most grievous accidents without adding anything to its gravity; taking it in the begin ning it often reduces it to merely a slight indisposition, and hardly ever permits it a fatal termination.

This assertion, I feel, will not easily be credited. What! it will be said, the least accident, the slightest malaise may under certain circumstances, occasion death, and you pretend to take away all danger from one of the most serious of diseases! Let us understand one another—one may die of a prick, of a chill, of a nothing—one may die of typhoid fever treated homœopathically. There are circumstances combining which lead fatally, irresistibly to the tomb. These accessory circumstances, exceptional, and the only ones to be dreaded, should not make us call dangerous, a disease, which is not so by itself. Well, we aver, that typhoid fever, taken in time, and treated homœopathically, is in no way dangerous. Among from seventy to eighty patients, which we have treated up to this time, and of which a part was confided to us at an advanced period of the disease, none have died; all have been cured without exception;* and they were, nevertheless, of all degrees, of all varieties; some seemed to be beyond the resources of art, and were

* I do not count as failures two cases of young persons attacked with cerebral fever, in consequence of a suppression of the menses, with doubtful typhoid symptoms, which were confided to us at an advanced period, three or four days before their death, when there were already convulsions, loss of consciousness, and delirium.

despaired of by their physicians. It is a fact which we commend to the serious reflection of our brethren—a positive fact. For, in short, the greatest part belonged to families well known in this city; denial is not possible. Who has confided to us, up to this moment, a typhoid patient who has died?* We should be reluctant to publish this result, and

* Since writing these lines this misfortune has happened to us, accompanied with circumstances which it is important to mention. Two young persons, belonging to the same family, returned to the house of their parents, quite indisposed, from the neighboring city of T———, where the typhoid fever was raging. They immediately took to their beds, and soon presented all the characteristics of the disease. They were soon cured under the action of homœopathic remedies. But, at the height of their disease, one of their brothers, who was living in a boarding-house whose healthy locality and condition left nothing to desire, and who was himself in excellent health, came to make them a visit, and was soon after attacked with typhoid fever. The disease followed its regular course, and promised to terminate as the others had done, when, in consequence of some aliment given without permission, at the time when the urine began to deposit, delirium came suddenly on, the pulse became of an alarming feebleness, and the skin of a burning dryness. The urine immediately changed its nature; it now only presented a suspended eneorema, and death soon supervened. This fact gives us occasion to observe that typhoid fever may be contagious, and it shows the necessity of consulting the urine in prescribing the alimentation, and the justice of the indications furnished by this liquid secretion.

to take advantage of it, if it arose from any personal merit or talent; but as all the credit is due to a method, a method too little known, not rightly appreciated, we believe it proper to insist upon this fact, and proclaim it aloud. To say the truth, I do not think this can be presented as a habitual result. It is very probable that the proportion of mortality should in general be about three or four per cent., and our school already possesses documents sufficient to establish it.

This dreadful disease, subjected to Homœopathic treatment, loses, in great part, not only the seriousness which properly belongs to it, but also that which is superadded by empirical, disturbing or debilitating medications, employed up to this time to combat it.

I should also state, beside, that this poor young man was attacked, several years since, by an eruption on the face, which had resisted all medical treatment. This inveterate psoric disposition had, without doubt, rendered the action of homœopathic remedies less efficacious.

TREATMENT OF TYPHOID FEVER.

THE Homœopathic School possesses precious clinical studies upon this disease, among others, those of Doctor Bartle, a military physician, who employed the new method in the hospitals for many years. We cannot follow a better guide in the exposition of the treatment of typhoid fever; we will add to his the results of our own experience, as succinctly as possible, in order to furnish to Allopathic practitioners, in a few pages, sure and precise indications.

Under the therapeutic report, we may divide the course of the typhoid affection into three periods.

The first, which we will call the *vegetative period*, or of the premonitory symptoms, demands, according to the symptomatic appareil, the following remedies: *Pulsatil.*, *Nux*, *Mercur.*, *Dulcam.*, *Bryon.*, *Rhus*, *Ipecac.*, *Veratrum*, *Digital.*, and *China*.

We find in *Pulsatil.*, the most efficacious agent, in feeble and lymphatic constitutions, when there is a predominance of chills, absence of thirst and

appetite, a bad mouth, white tongue, nausea, vomiting of mucus, mucous stools, disposition to weep and grieve. We should give the 6th dilution, one drop in distilled water every twelve, six, or three hours.

When the bilious or gastric symptoms predominate, with tenesmus or constipation, we employ *Nux*, from the 3d to the 12th dilution, twice a day, in globules, or in drops indifferently.

Mercurius is particularly efficacious in individuals of a nervoso-lymphatic constitution, delicate and feeble, with face pale and yellowish, tongue covered with a very thick coating, putrid, insipid taste, little thirst, painful sensibility of the epigastrium and the hepatic region; *stools copious, liquid, flocculent, and a little sanguinolent.* We administer a grain of the first or second trituration, every two or three hours. Under the influence of this medicine the stools diminish in frequency, become bilious and less aqueous; the painful sensibility of the abdomen disappears little by little, and with it all the other morbid symptoms. We prefer *Merc. sol.* We have good reason to believe that this medicine sometimes prevents the formation of intestinal ulcerations.

Dulcamara succeeds when the disease is preceded by a chill (warm and cold), when the tongue

is clean, absence of the gastric symptoms, yellowish fluid stools, accompanied by borborygmus, torsions, cuttings, pressure in the abdomen, abdomen painful, especially in the region of the umbilicus. This medicine, given in the first dilution, one drop every three or six hours, soon arrests the abdominal pains, renders the stools less frequent and more consistent, provokes a general perspiration, during which the fever dissipates.

Bryon. is indicated when the disease threatens to pass to the second degree, and there are already some nervous manifestations; tearing, beating, lancinating, cephalalgia, disgust, nausea, rising in the stomach, white tongue, mouth bitter, dryness in the throat, thirst, vesicular eruptions upon the lips and in the mouth, cramp-like pains in the stomach, sensibility of the epigastrium to pressure, bowels painful, emissions of wind, constipation, urine rare and troubled, voice feeble and hoarse, morning cough, shootings and stitches in the side in coughing, and in breathing deeply, pains in the joints and limbs, overwhelming lassitude; we give it from the 3^{d} to the 12th dilution, one drop every three hours.

Rhus is called for when there is confusion in the head, shootings in the brain, dry, burning heat, tension and stiffness in the nape of the neck, aggravated in the evening and by motion. This medi-

cine suits still when there are wandering pains in the nape of the neck and breasts, with fatigue and lassitude of the limbs; in the most acute state of the first period, when the nervous symptoms begin to manifest themselves, tongue coated, diarrhea with borborygmus, chills, vertigo with occlusion of the eyelids, alterations of the colors of the face, dryness of the throat, vomiting of the ingesta, yawning, head affected and heavy, pressure upon the eyes, painful susceptibility to noise and light, drowsiness, feebleness of the memory, tendency to delirium, under lip and tongue dark; from the 3d to the 12th dilution, one drop every two or three hours.

Ipecac. succeeds in cases which assume a very gastric character, with choleriform state, fluid dejections of a clear green; from the 1st to the 3d dilution, one drop often repeated.

Veratrum alb. is always found of great efficacy when the affection commences by vomitings, and fluid dejections, with coldness of the limbs, and cold perspiration. In a case advanced to the second period, when the extremities to the elbows and knees were cold as marble, and covered with petechiæ, the pulse hardly sensible, the abdomen extremely painful, with stools, and involuntary micturitions, this was the only efficacious remedy. It was administered from the 6th to the 12th dilution, in

globules, first every two hours, then at an interval of one and two hours alternately. This grievous symptomatic appareil was promptly modified; the petechiæ persisted, it is true, for fifteen days.

Digital. finds its application in cases of a nervous-lymphatic constitution, when there is dilatation of the pupils, tongue quite clean, pulse slow and regular, depression of strength, pression and fullness of the epigastrium, disgust, nausea, and even vomitings; from the first to the third trituration, a grain every three hours.

China is indicated when the disease takes the appearance of a slow fever (schleicheud); pallor of the face, cephalalgia, confusion of the sight, ringing in the ears, feebleness of the hearing, tongue coated, dryness and bad taste in the mouth, thirst, nausea, pression of the epigastrium, which is sensible to the touch; swelling and sensibility of the abdomen; watery stools, lientery, urine rare, difficulty of breathing, pressure upon the chest, lancinating pains, tearing pains in the limbs; anxiety, sleeplessness, coldness, especially of the hands and feet. We give one drop of the tincture of the third dilution every three hours.

* This expression belongs to the physiological theories of the Germans; they use it in contradistinction to the epithet, Vegetative, which they give to the precursory period.

In the second period, designated by many practitioners as the animal period*, or gastric inflammatory, we should have recourse to the following medicines: *Pulsatil.*, *Mercurius dulcis*, *Bryonia*, *Rhus*, *Acid. phosph.*, *Cham.*, *Belladonna*, *Aconite*, *Calcarea carb.*, *Coccul.*, *Hyoscyam.*, *Sulph.*, and to the application of the hydropathic treatment.

Pulsatil., in cases of soft and relaxed constitutions, with little or no thirst, gastric indisposition, pale or sallow complexion, phlegmatic temperament, anxiety, grief; mouth bitter, tongue covered with a whitish or green coating, anorexy, glairy vomitings; from the 3^{d} to the 6th dilution, one drop (in distilled water) three or four times during twenty-four hours.

Mercurius dulcis suits when the gastric states are badly defined; painful sensibility of the whole abdomen, watery stools, almost colorless, or mixed with flocculent matter, or like the washings of flesh, and taking place more commonly at night. We should cease to use it when the tongue becomes dry and delirium comes on; we should give the first triturations, a grain every two or three hours. Under the influence of this medicine, the stools become bilious, more consistent, less frequent, the painful sensibility of the abdomen is dissipated, and with it all the other morbid symptoms.

The cases where *Bryon.* shows itself the most

efficacious are those which assume the character of *febris nervosa versatilis* or cerebral typhus; when a violent delirium is accompanied by an intense febrile heat, great thirst, with dryness of the mouth, and vesicular eruption in the interior of this cavity; epigastrium sensible to pressure, swelling of the abdomen, urine dark, shootings in the sides of the chest in coughing and breathing deeply; drowsiness during the day, nocturnal agitation, pulse small and soft; clammy perspiration, trembling of the hands; from the 3d to the 12th dilution (one drop in distilled water every two or three hours). The old Homœopathist of Presburg, Dr. Anelli, has always found, in his long practice, this indication of *Bryonia*. He says to me on this subject as follows: "Typhoid fevers are frequent at Presburg, and they are generally of a well defined character. They commonly commence with a severe chill, accompanied by vertigo, which lasts about an hour. It is then replaced by a great heat, which persists for two days, diminishing little by little; then comes delirium, loss of consciousness, and the patient fades away insensibly, at the end of a few weeks, in a profound stupor. The most remarkable feature they present, is the absence of abdominal symptoms. Under the Allopathic treatment, the majority of these cases terminate fatally; the same

thing occurs when they are left to the resources of nature. If a cure is to take place, there comes on, toward the twentieth day, a complete deafness; this critical phenomenon of good augury appears on the fifth day, under Homœopathic treatment, under the influence of which the mortality is reduced almost to zero. *Bryonia* is the medicine indicated, and often alone suffices to conduct the disease to a happy termination."

Rhus is called for in all the periods of the disease. It is especially indicated when the ensemble of the symptoms assumes the character of *febris nervosa stupida*, as also when the alvine ejections are extremely copious. It is one of our most powerful medicines; it restores the strength in arresting or moderating the fatal colliquative diarrhea, and diminishes the intensity of the cerebral congestion. We administer in the same manner as Bryonia, with which it has the greatest analogy.

A state of prostration, with partial loss of consciousness, scorbutic alteration of the buccal membrane, extreme slowness in replying and moving, aqueous colliquative diarrhea call for the *Acid. phosphor.*, from the 1st to the 3d dilution, one drop

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* Flat, prominent spots of a clear brown, and very different from petechiæ, properly speaking.

every two hours, in distilled water. This medicine has effected for us, my father and myself, the most beautiful cures of typhoid fever; we may add to the indications given by Bartle: the great number of petechiæ,* the profuse perspiration, and blond, delicate constitution.

The following divers symptomatic groups determine the employment of *Cham.:* redness and febrile heat of the cheeks in the afternoon, with swelling of the parotids, redness and dryness of the buccal membrane, tongue cracked, coated, taste putrid and bitter, fetid breath, ardent thirst for fresh water; when there is nausea, bitter vomitings, pressure upon the stomach, colic, very painful sensibility to pressure of the abdomen, aqueous, yellow and green stools, urine with a yellow, flocculent deposit; when there is catarrhal hoarseness, mucous rattle in the chest, tickling in the trachea, which provokes a cough; oppression, wakefulness, soporous state, with subsultus, vivid dreams, pressure upon the sternum, shootings, burning in the chest, sub-delirium, dry and febrile heat, anxiety, nervous irritation, sighs, shuddering: 6th dilution. two or four times in twenty-four hours.

Belladonna is indicated in inflammatory cases, where the pulse is full, hard, frequent, the beating of the carotids sensible, the face animated vul

tuosa, the skin warm and dry, the tongue red, dry, great thirst, the bowels flatulent, urine dark and turbid; when the patient complains of headache, or when he is delirious, the eyes brilliant and fixed, cries, agitation during sleep, frightful dreams, carus: from the 3d to the 12th dilution, it is desirable to alternate with *Aconite* 3d every two or three hours, when the intense febrile heat continues, accompanied with involuntary fluid stools. These medicines commonly provoke a perspiration, which is the prelude to a general amelioration.

Bartle employs *Calcarea carb.*, at the end of the second period, or at the commencement of the third, when the intestinal ulcers appear to be forming, and the diarrhea does not yield to the medicines Homœopathically indicated. He administers this medicine sometimes alone (at the 30th dilution, one drop two or four times in twenty-four hours), sometimes alternated with the medicine which answers best to the ensemble of the symptoms; the repetition is then more frequent, (six or eight times in the day). It is the alternation with *Belladonna* which gives the best results. We begin with the 30th dilution. If there is no amelioration in twenty-four hours, descend to the 24th, 18th, 12th, and sometimes even to the 6th. The best manifestation is a diminution in the sensibility of the

abdomen in the meteorismus, the agitation and anxiety, the stools become more consistent and more rare.

Phosphor. is employed with success toward the close of the second period, when there is sanguine congestion of the lungs (hepatization), with oppression and anxiety. In typhoid pneumonia, when *Aconite* 3d repeated, brings no amelioration, and the expectoration becomes sanious, fetid, *Phosphor.* is perfectly indicated. The proper dose is from the 6th to the 12th dilution, one drop three or four times a day.

Bartle has often obtained prompt and happy effects from *Sulphur*, in cases where *Rhus*, *Bryonia*, *Acidum*, *Phosphoricum*, had been administered without result. The indications of this remedy are: countenance very pale, eyes dull, itching eruption of the lips, burning dryness of the mouth, aqueous stools, generally nocturnal; dry cough, especially in the evening and at night, shootings in the chest, oppression, wakefulness, sleep uneasy, agitated; dry heat of the skin, with tranquil pulse. One grain of the second trituration, once or twice a day.

Pulsatil., 12th dilution, and *Cannabis* of the 1st and 3d are very efficacious in retention of urine, or in its painful emission. *Hyoscyamus*, in the

frequent desire to urinate, or in the impossibility of urinating. It should be administered from the 3d to the 9th dilution.

Aconite and *Belladonna* suit very well in the beginning of the fever, when inflammation of the parotids manifests itself. Every time that Bartle has had to treat inflammatory swelling of the parotids which showed no tendency to disperse, he has succeeded in effecting this dispersion by means of *Bell.*, from the 12th to the 6th dilution, and in certain refractory cases, by *Bell.* 12th, alternated with *Calcarea carb.*, 12th to 30th dilution. The resolution of the glands, followed by convalescence, has always been the result of this treatment.

Acon. and *Bell.*, either alone or alternated, ordinarily procure the resolution of the amygdalæ, especially when the inflammation is phlegmonous and the redness dark. When the redness is more pale and the tonsils are covered with little palish ulcers, *Bryonia* is very efficacious.

Belladonna of the 6th dilution, generally succeeds better in procuring sleep than any other medicine.

Puls., *Rhus.*, and *Sulph.*, are employed with success in bleedings of the nose, each in the symptomatic ensemble which calls for it, or concurrently with the remedy appropriate to the ensemble of the

symptoms. Bartle employed the lowest dilutions against this indication of the dissolution of the blood.

As for the cold water treatment, the attention which this therapeutic process has obtained, induces me to repeat word for word, what Dr. Bartle says respecting it: "Pure cold water, produces a better sanguification, and administered as a drink, procures for the fever patient the most agreeable refreshment; employed moderately externally, it revives and strengthens the nervous system, favors the reaction, renders the system more susceptible to Homœopathic remedies, provokes the crisis by the urine, and especially by perspiration, and aids powerfully the action of the medicines administered for this object. It often happens, that toward the close of the second period, the medicines the best indicated, bring no favorable change, and even produce grievous aggravations, we then obtain from the employment of fresh water internally and externally, salutary critical changes, and under this influence, the medicinal aggravation gives place to curative effects.

"The hydropathic treatment not only does not interfere with the action of Homœopathic remedies in general, but is often a very useful auxiliary in the treatment of serious typhoid fevers. The simultaneous application of these two methods produces

abundant perspirations which relieve the organism of the altered and morbid fluids, and thus re-establish the equilibrium of the functions.

"The patient may, from the commencement of the disease until its end, relieve his thirst as often as he pleases with small quantities of fresh water, gargle the dry and burning mouth, cover with wet compresses the hot and painful head, apply to the distended abdomen saturated linen; these should be often renewed. In constipation and diarrhea, cold clysters may be used; if the patient complains of great heat, general dryness, he should be washed and rubbed over the whole body, and when that does not suffice, he should be wrapped in a wet sheet. As long as there is no diarrhea, the patient may drink as much as he pleases; but as soon as this comes on he should moderate its use, for fear of increasing the dejections. The thirst, dryness, and heat of the throat should then be appeased by frequent gargles.

Strong cerebral congestions with cephalalgia and dryness of the cutaneous envelope, call for the often repeated application of wet compresses. They are always a great relief to the patient. The considerable discharge of heat prevents the energetic, and therefore dangerous cerebral reaction. In meteorismus with painful sensibility of the abdomen,

we cover the whole of the lower abdomen with wet compresses; they should be wrung out hard and only renewed when they are almost dry. They should be exactly covered with dry linen or even with a large band of oil-cloth. There results from this a condensation of abdominal gas, consequently a diminution of meteorismus, and a marked amelioration in the sensibility of the part.

"Against obstinate constipation we commence by the use of injections of tepid water, then cold water; these never fail to produce the desired effect. If diarrhea comes on, we mix starch in the injection, a drachm to two ounces of water, administered after each dejection. We diminish thus, in a very appreciable manner, the irritation of the large intestine. Thus, as I have already said, if toward the close of the second period the homœopathic remedies indicated do not procure a favorable reaction, if the intensity of the heat does not diminish, and if the exacerbation of the evening augments, I have recourse to the external application of cold water, in order to provoke the critical perspirations. For this purpose I choose the moment of the greatest heat, have the patient completely undressed, and rubbed briskly with a sponge wet in tepid water at first, then in cold water. The patient should then be rubbed dry and put into bed. If this process is not

sufficient, I then direct the patient to be put into a common bathing-tub and sprinkled, first with tepid, then with very cold water, at the same time rubbing his whole body with the palms of the hands; a much more gentle and efficacious means of friction than that produced by linen, and recommended by Priesnitz. An immediate amelioration is manifested by a permanent diminution of heat; respiration becomes easier, the circulation more free, the pulse normal, the sleep peaceful. In this state we envelop the patient in a wet sheet well wrung out, a dry sheet over this; cover him warmly, and wait patiently for the appearance of the perspiration. If at the end of an hour, this is not produced, we renew the application of the wet sheet, and wait another hour; then in case the perspiration does not appear, and the heat increases, we renew the cold sprinkling and swaddling until we have procured the sudation. It is commonly abundant and emits a strong odor. This hypersecretion procures, in general, the solution of the disease. We are careful, during the swaddling, to renew fresh compresses upon the head, while the feet have only dry envelopes. The wet sheet should not come below the ankles.

When the heat is intense, the lotions and swaddling should be renewed every two hours, sometimes every hour. When the meteorismus is very great,

we should combine the cold compresses upon the abdomen, with the general envelope of the wet sheet. When perspiration is produced, it should be encouraged by frequent drinks of thin cream, broth, and water which has been some time in the apartment. As soon as the perspiration begins to diminish and it appears advisable that it should cease, the whole body should be washed and rubbed with tepid water, the patient put into a clean bed, moderately covered, and all hydropathic processes discontinued. The air of the chamber should be often renewed, as well as the clothing of the bed."

In the third period of the disease the following remedies are indicated: *Bryonia*, *Rhus*, *Acid. phosphor.*, *Opium*, *Cal. carb.*, *Nux vom.*, *Hep. Sulph.*, *Aconite*, *Phosphor.*, *China*, *Metallum*, *Cham.*, *Arnica*, *Acid. nit.*, and hydropathic means.

Bryonia is found efficacious in cases of violent delirium, great febrile heat, ardent thirst, great dryness, little vesicles and ulcers in the mouth and upon the lips; painful swelling of the epigastrium, abdomen sensible to the touch, involuntary emission of urine and of fecal matter; despondency, drowsiness without sleep, complainings, mutterings, sub-deliriums, agitation, miliary eruptions; from the third to the twelfth dilution, one drop in distilled water every three hours.

Rhus is commonly administered with *Bryonia*, alternated every other day. It is especially called for when the patient is in a state of stupor and prostration, with an extreme feebleness which prevents his making the slightest movement; very abundant aqueous diarrhea, stools and urine involuntary. It is also especially suitable when the dissolution of the blood makes rapid progress, manifesting itself by epistaxis and petechial eruptions. We give it from the third to the fifteenth dilution. *Acid. phos.* should be alternated with *Rhus*, in the general stupor of all the organs, when the tongue is dry and cracked, the teeth covered with a coating, the lips black, cough frequent and dry, constantly lying on the back or side, continual delirium or dull mutterings, subsultus tendinum, fixed look, desire to escape, skin dry and burning, stools aqueous, abundant, and involuntary; pulse frequent, feeble, intermittent. The habitual dose is a drop of the first dilution administered eight or ten times in the twenty-four hours. In desperate cases, where the prostration approaches death, we prescribe the concentrated *Acid. phos.*, from two to six drops in several ounces of distilled water, taken by teaspoonsful. We administer this preparation in injections against intestinal hemorrhages.

Bellad. possesses the special property of impressing upon the disease a profound modification, a different and favorable direction. We generally administer it at the sixth dilution, sometimes at the twelfth, more rarely at the first; this medicine is, beside, indicated by general erethismus, violent delirium, great internal and external heat, redness and swelling of the face, dry tongue, absence of sleep; it agrees still when the patient is in a soporous state, without complaining, without wants, excepting of drinks; difficulty, and sometimes impossibility of deglutition, eyes fixed, brilliant, mouth open by the relaxation of the lower jaw, tongue stiff, so that it cannot be put out of the mouth, deafness, drinking with avidity a little at a time, bowels distended, stools and urine involuntary, disposition to slip down toward the foot of the bed, to uncover, and throw out the legs, subsultus tendinum, drowsiness without sleep, pulse intermitting. *Bellad.* has always been found, in these cases, one of the most powerful of our medicinal agents.

Opium is given with great success in profound coma, with slow pulse, full but depressible, light mutterings, subsultus tendinum, fixed gaze, wrinkled skin, dry tongue, fetid and involuntary stools, from the second to the third dilution.

Calcarea carb. is indicated in the commencement

of this period during the formation of the intestinal ulcerations. It is often useful to alternate it with *Rhus*, and *Bellad.*, according to the symptoms. In frequent hæmoptysis, we should commence with the 30th dilution, and descend progressively to the sixth. If *Calcarea*, does not arrest the epistaxis, we should have recourse to *Hep. sulph.*, *Calcarea*, of the first dilutions.

We administer *Nux vom.* when there are intestinal cramps, and obstinate constipation, which determine congestions toward the head or chest.

In the excessive excitement of the arterial system, we obtain very good effects from *Aconite.* We alternate it with *Bell.*, in parotis, and *Bell.*, with *Calcarea*, when the febrile action has ceased. In pain in the side, with fever, we alternate *Aconite*, with *Arnica* 3d dilution or with *Bryon.*

Toward the close of the third period, when the seat of the disease seems to be fixed upon the chest, sanguine pulmonary congestion, hepatization and consequently dyspnœa, stitches in the side, mucous rattle, abundant expectoration of sanguineous mucosities and even of fetid sanies, *Phosphor.* is very efficacious (it is with *Bryon.*, the best medicine against typhoid pneumonia). From the fourth to the twelfth dilution, one drop in distilled water several times a day.

China succeeds, in the last period, in dissipating nocturnal sweats, accompanied by increasing feebleness, tenacious constipation, with a clear tongue and indolence of the abdomen.

Metallum. This powerful modifier, which some practitioners have cried up in the treatment of typhoid fevers, has hardly ever been employed with any advantage by our Dr. Bartle; a new proof that the affections classed under the same pathological denomination are, far from being identical, very insignificant shades in the symptomatic expression, may indicate a profound difference in the nature of the disease, and demand the employment of different medicines; from which we may see the great importance of taking into consideration the ensemble of the symptoms.

Bartle says, concerning *Metallum:* "The employment of this medicine in the cases I have treated here, has not in general afforded me any very favorable results, although I have administered it in different dilutions, and repeated doses. Once only, when the fever became slow, (schleichend), accompanied by copious liquid stools, preceded by a sensation of extreme feebleness,* pains in the

* This phenomenon is a characteristic symptom of this medicine.

abdomen and ardent thirst, *Metallum*, 9th dilution, alternated with *Chamomilla* 6th, produced a prompt effect. Under its influence, there appeared upon the calf of the leg, a hard swelling, accompanied with severe pain, which put an end to the typhoid affection. The patient having previously suffered from scrofula, I administered to him one drop a day of *Iod.*, 2d dilution, by which the hard and painful swelling was soon dispersed."

When *Phosphoric acid* does not procure amelioration in intestinal hemorrhages, we should use *Nitric acid* alone, or alternated with another Homœopathic medicine indicated, one drop of the 1st dilutions. We add to this the application of cold compresses upon the abdomen. If we do not obtain by these means the desired result, we administer *Nitric acid* in injections), from four to six drops in two or three ounces of water); it is seldom that intestinal hemorrhages do not cease under the action of this treatment; but when we are obliged to resort to injections, the case is very grave, and almost always fatal. In contusions of the sacrum, we combine advantageously lotions of water and alcohol, or applications of simple *Cerate*, with the use of the Homœopathic remedies indicated, which are generally *Rhus*, *Arnica*, *Bella donna*, *Acid. nitr.*

Cold water produces good effects, even in the third period of this disease, in cases where the medicines do not bring on favorable reactions. The patient should drink small quantities frequently.

In cerebral congestion, and in painful tympanitis, we apply cold compresses on the head, and on the abdomen, renewing them frequently until the disappearance of the symptoms, and the appearance of perspiration.

Against obstinate diarrhea we use amylaceous injections, followed by enveloping in the wet sheet, when the skin is dry and burning, as is commonly the case. If this process is not sufficient to produce the desired reaction, and the patient remains in a state of stupor and insensibility, we put him into an empty tub, and sprinkle him with fresh water, while several persons rub him with the hands. We often see urine and abundant perspiration come on during this treatment; consciousness returns, the tongue becomes clean and moist, the stools more consistent and less frequent; everything indicates a favorable termination. From this time all Hydropathic treatment should be discontinued, and the cutaneous exhalation favored by warm covering. If there is cough, with thick expectoration, we should abstain from cold water, using tepid instead.

Divers morbid states persist after the cure of the typhoid affection, and require a special treatment; they are subcutaneous petechial hemorrhages, contusion or ulceration of the skin of the back, and especially of the sacrum, in consequence of long decubitus, parotis, deafness, furuncles, metastatic abscesses, miliaria, an eruption analogous to the itch, diarrhea, cough without expectoration, night sweats, œdema of the inferior extremities, and at last abdominal phthisis.

It is rarely useful to administer medicines against sanguineous cellular effusions. They dissipate of themselves under the influence of a good regimen and the re-establishment of the strength. However, if the reabsorption is protracted, we can accelerate it by the administration of a few doses of *Arnica.*

Bellad., repeated in the low dilutions, promptly modifies the inflammation of the skin of the sacrum, produced by long decubitus. If the part affected becomes gangrenous, we have recourse to *Carbo. veg.*, given internally in the highest dilutions, at the same time that we powder the wound with the first triturations.

China, *Metallum*, and *Sulph.*, internally, agree also when *Carbo. veg.* does not suffice to arrest the progress of gangrene. *China* favors the formation

of proud flesh and cicatrization. *Silicia* is indicated when the alteration extends to the osseous tissues. We should add to the use of these various medical substances, lotions and frequent renewal of air and linen.

The parotids resolve under the influence of *Bell.* and *Calcarea*, alternated. In *Bell.* alternated according to the symptoms, with *Sulph.*, *Lycopod.*, or *Silicia*, we have an efficacious means of putting an end to the interminable production of furuncles.

Bell., and *Hep. sulph.*, conduct to a favorable termination, these metastatic abscesses.

The miliary eruption calls for *Rhus*, *Bryon.*, and *Sulphur*. We should avoid the use of even tepid water, lest we produce fatal metastasis. In the eruption analogous to the itch, lotions, tepid baths are, on the contrary, favorable; we administer then according to the symptoms, *Sulph.*, *Mercur.*, *Carbo. veg.*, *Caust.*, *Rhus*, *Acid nitr.*, *Lycopod.*

Obstinate diarrhea, which comes on in general after constipation, and which does not depend upon a saburral state nor upon a chill, calls for the use of *China*, repeated from the first to the sixth dilution.

An obstinate cough, accompanied or not with expectoration, commonly yields to *Ipecac.* 3d, and if it comes on in the night, to *Sulph.* 2d and 3d trituration, one or two globules a day. This medi-

cine in the same dose, cures the night-sweats, which are not arrested by the strengthening regimen of convalescence.

The diarrhea which comes on during convalescence, after a constipation of long duration, is generally a very bad sign, and ordinarily indicates the development of an intestinal phthisis. The patients attacked with this dreadful affection, complain of periodical colics, and of a burning sensation in the abdomen, especially through the passage of the transverse colon. The appetite is good, the tongue clean, of a dark red, the bowels soft, rarely distended; in pressing with the hand upon the region of the cæcum, we perceive a noise like agitated liquid, and the patient experiences a violent pain; there is much borborygmus and rumbling in the bowels, especially in the night, similar to the gurgling of a bottle while emptying it. In the beginning of the disease, the diarrhea only manifests itself during the night; it occurs afterward during the day, but remains always more frequent at night. The stools are at first, of a clear brown, then we remark bloody streaks; at last it appears composed of a purulent sanie mixed with black and fetid blood; urine rare and turbid, hectic fever increasing in the evening; at last nocturnal colliquative sweats, excessive emaciation, death.

We succeed sometimes in arresting the progress of this dreaded affection by the employment of *Pulsat.*, then of *Belladonna*, and *Calcarea carb.*, given alternately. In the first epidemics which he had to treat, Bartle obtained good effects from *Metallum* and *Sulph.*, at the high dilutions, alternated. In the more recent epidemics, *Carbo. veg.*, from the 30th to the 12th dilution, administered by the drop in distilled water, every three or six hours, he found much more efficacious. It is of these last that we speak in this article. During the two first periods, it is well to administer several times in the twenty-four hours, a few spoonsful of light porridge or of barley water.

Fresh water is preferable to any other drink; nevertheless, when there is diarrhea, it is prudent to moderate its use, and to satisfy the thirst by frequent gargling with cold water; the air of the chamber should be often renewed, the linen changed, and the patient moderately covered; a medium temperature should be preserved in the apartment.

In the third period, we should endeavor to nourish a little more. The patient may take several times a day of barley water, of panada or of milk. Meat broths and white meats, as veal and poultry, should only be permitted when the convalescence is well established. The use of beef and mutton, of

wine and beer, requires a degree of strength which is but slowly attained.

Fruits are entirely forbidden, on account of the constant disposition to diarrhea.

The average mortality of patients treated by Dr. Bartle was one-twelfth. But this proportion will appear to greater advantage, when we consider that a great majority of the typhoids received at the hospital, were already in the second period of the disease, and very much debilitated by diarrhea. As for those who had as yet only the first symptoms of the disease, they were almost all promptly re-established, and do not *figure in the number of individuals treated.* Thus the Homœopathic mode of treatment shows itself equally efficacious in preventing this formidable disease, arresting its progress, and in conducting it to a favorable termination when fully developed. The advantageous results from this treatment greatly surpass those of all the systems in use up to the present day.

In order to complete the indications, I am about to reproduce here, what I wrote to my father in 1842, while studying the treatment of typhoid fever in the Homœopathic hospital of Vienna, Austria.

"I have revisited our Homœopathic hospital of Vienna. It is always the prettiest gem of a hospital one can imagine, with its gardens, its elevated

saloons, wax floors, and perfect ventilation, and decorated with that luxury of little ornament with which the Sisters of Charity are pleased to embellish the sojourn of the poor. The morning visits are much frequented by a number of young doctors who come here to finish their Allopathic studies, and desire to instruct themselves in the new method. These visits, constantly renewed, form a fruitful and inexhaustible nursery of Homœopathic practitioners who spread themselves over the whole empire. But the Sisters of St. Vincent de Paul, whose principal institution is annexed to this hospital, contribute, perhaps, still more efficaciously to the extension of Homœopathy; for they are wanted in the hospitals that are founded in the provinces, and they insist upon the introduction into these hospitals of our mode of treatment, which, they say, succeeds very well, and almost without expense of pharmacy. They sometimes succeed, when the governmental influences are not too preponderating. It is thus that our school has obtained the hospitals of Lintz and of Kremsir. What a fortunate, what a beneficent combination is that of the domestic direction of the Sisters of St. Vincent de Paul, and the Homœopathic treatment, the best care of body and soul! These new establishments have an inexpressible charm of peace and well-being. There,

the patient is not subjected to a brutal treatment, bleedings, blisterings, cauterizations, moxas, purgations (D), nauseous potions, all these disgusting and painful operations are unknown. The morbid affection passes regularly and peaceably through its periods with almost always a favorable termination, under the action of simple medicines which revolt none of the senses. The natural evils are softened, and conducted safely to an end, without adding any new suffering. The devoted hand of the sister makes so soft a couch, their gentle words are so soothing in the moments of greatest suffering, that if one had not a mother, he would wish to pass here his last sickness.

And yet what opposition exists against this admirable union of a simple, agreeable, and efficacious treatment, and the tender cares religion alone knows how to bestow! What sad thoughts take involuntary possession of the mind and of the heart at the idea of the obstacles opposed, especially in France, to the realization of so great a good. That they spend hundreds of thousands of francs to drug patients, to their great detriment, is sufficiently deplorable, but they have for excuse the aberrations of science. What is incomprehensible, is, that Paris, the natal city of the Sisters of Charity, prefers to them, in their hospitals, mercenary employees,

and obliges them to go to exercise their charity among the Turks of Constantinople, and the Arabs of Syria.

The diseases which predominate in the Homœopathic hospital of Vienna are always simple pneumonia and typhoid fever. This last is epidemic in Austria since the great wars of the Empire, and especially since the cholera. The Homœopathic practitioners of this country have thus acquired a great experience in the treatment of this disease; and as I learn that it has shown itself epidemically at Lyons, I send you the information I have acquired here respecting the treatment in use.

At Vienna, the simple abdominal typhus predodominates; the brain and the lungs are less often and less seriously compromised than in the cases which present themselves in France; the dissolution of the blood is also less pronounced, the petechiae little marked, and the bleeding of the nose, in the beginning, is rarely seen. The disease, then, is the regular evolution of the special ulceration of the small intestine, with the morbid phenomena which physiologically result from it: fever, harsh dryness of the skin, and of the tongue, meteorismus and sensibility of the abdomen to the touch, especially in the right fossa iliac, colliquative diarrhea, scanty, and very fetid, fuliginosity of the

mouth, excessive feebleness, stupor, and death in more than half of the cases.

The treatment in the Homœopathic hospital is very simple, and crowned with success, in nine cases out of ten. The superintending physician, Doctor Fleischmann, uses first *Bryonia*, (from the 2d to the 6th dilution decimal, a few drops in three or four ounces of water, to be taken by teaspoonsful, six or eight times a day), if the patient was brought in the beginning of the affection, a thing which rarely happens. The patient is generally in an advanced state, and he immediately prescribes *Metallum* or *Acid. phosphor.*, the last from the 1st to the 4th, and the first from the 4th to the 6th dilution, administered like *Bryonia*, increasing the intervals between the repetitions, as the disease loses its acuteness. *Acid. phosphor.* is employed in preference in cases of young and blond subjects, with a white and delicate skin, when the diarrhetic stools are very abundant, and not very fetid. He commonly continues one or the other of these medicines without changing during the continuance of the disease.

In this clinic, *Metallum* is the basis of the treatment, the means employed in nine out of ten cases; all the others are employed but as accessories, answering to secondary indications. The Homœo-

pathic practitioners know the great resemblance which exists between the toxic effects of this medicine and the characteristic phenomena of abdominal typhus; but here the thing has been more fully studied. It is now two years since there appeared, in the Homœopathic Journal of Vienna, a very remarkable article from Doctor Hausmann, upon metallical intoxication, considered from the dynamico-physiological and anatomo-pathological point of view.

He shows that this intoxication constitutes, in its various relations, a special morbid state, always like itself, and having the same features of resemblance with abdominal typhus, that the mercurial diathesis has with the venereal disease. He concludes his memoir as follows: "Metallical ileo-typhus and the abdominal typhus are in relation to the anatomical and physiological phenomena, two morbid states, remarkably similar. *Metallum*, which produces metallical ileo-typhus, cures abdominal typhus.

"At the Hospital of the Sisters of Mercy at Vienna, they received, in 1841, one hundred and sixty-seven cases, which were treated with this remedy in Homœopathic doses. There were one hundred and fifty-six cured." The proportion of nine in ten is very near the average for several years.

"Our method might furnish us still better results, and Doctor Fleischmann's treatment is, to a certain extent, injudicious. He does not, for example, attack the disease in the beginning with sufficient promptitude, by the administration of the medicines indicated; he waits until it has assumed the character with which *Metallum* agrees. He thus allows the evil to increase, and exposes himself to a long and precarious convalescence. This is what sometimes happens, and he complains of it himself. In the second place, he is wrong in persisting in the use of the same medicine when the disease has changed its physiognomy, and taken the hectic form.

"Abdominal typhus is epidemic at Vienna since the great wars of the Empire, and the cholera has visited us twice, and communicated to it a new intensity. We might say that it divides the morbid domain with the diseases of the respiratory organs, which are also very common here.

"During my sojourn in the hospital, they received thirty cases of typhoid fever, of whom four only had a fatal termination. Their average duration was two weeks, during which time the disease ran rapidly through all its periods, without missing one, and sometimes conducting the patient to the highest degree of cerebral exaltation, or of marasmus and

feebleness. That which constitutes the beautiful result of this treatment, is not its arrest, its destruction, its forced abortion, but the rapidity of its progress, the favorable proportion of its cures, the promptitude of the re-establishment. It is these short convalescences which I the most admire.

"The comparison is very striking between the Homœopathic cures, and those effected by the old school, so slow, so precarious, and so full of complications. We may thus form an exact idea of the therapeutic action of the new system, and appreciate the injustice of the reproach addressed to us by our adversaries, touching our antiphysiological pretensions of baffling miasmatic affections."

The following are observations made elsewhere:

In private practice, especially here, where the Homœopathic practitioner is in general the physician of the house (Hausarzt), one is called from the very commencement of the indisposition, a long time before the disease has passed into the state which calls for the employment of *Metallum*. We commence ordinarily with *Bryonia*, *Belladonna*, or *Rhus*.—*Bryon.*, if there is a predominance of lancinating pain in the abdomen, the sides of the

chest and head, which cases are of frequent occurrence, dry cough, bitter mouth, pains in the joints, febrile exacerbation in the evening, with chills and heat; *Bell.*, where there is cerebral congestion, face red, puffed, expectoration or stools bloody; *Rhus* against ataxic symptoms, variability of the pulse, anomaly of the nervous system. When the disease drags, and seems disposed to pass into a consumptive hectic fever, without favorable reaction, we almost always succeed in procuring a prompt and fortunate termination, with a few doses of *Carbo veg.*, fourth trituration, or third and sixth dilution. This powerful agent stimulates efficaciously the vital forces; at the highest dilution, its action would perhaps be more complete, but less prompt. The salutary excitation which it provokes, is often the indispensable condition for the employment of the Hydropathic processes (E).

It is sometimes necessary to endeavor to excite the functional activity of the intestinal canal greatly depressed. To this end, Doctor George Schmidt administered with success *Merc. dulcis*, first trituration (centesimal), and *Rheum* (same preparation).

Typhoid fever only acquires the fullness of its development under the form of typhus; it is well to consult the clinical advice given upon this point by

Dr. Bartle, who treated this disease in the great military hospitals of Southern Austria, where it presents itself under more various forms. These prescriptions, of which we have reported the greatest number in this memoir, do not differ from those which we use with entire success in the sporadic cases of our practice.

During the whole course of the treatment, the administration of the remedies should not cause us to lose sight of the hygienic treatment, and the alimentary regimen. The frequent renewal of air in the chamber of the patient, frictions with the hand or flannel, upon the benumbed, dry, withered parts, fomentations and injections of tepid water, gargling with fresh water, cold compresses upon the forehead, unctions of oil and of *Arnica* upon the injured and painful parts, all these little means gently solicit the vital reaction, and prevent formidable complication. The skill and the experience of the physician is not less apparent in this hygienic treatment, than in the judicious choice of the remedies.

The alimentation is also very essential, it is the most delicate, the most difficult part of the treatment, that which exacts the surest medical perception. The practitioner, ignorant of the rules which should govern the dietetic prescriptions, will never

succeed in the treatment of typhoid fevers. In general, in the old school sufficient importance is not attached to these things. They are much more ready to inform themselves of the blisters, if they draw; of the potions, if they are swallowed, than of the real imperious needs of this poor organism, that a light broth would reanimate, and which is wearing out under the action of these magistral drugs. I do not doubt that a considerable proportion of patients perish, victims to this carelessness. We have had some striking examples of this. In a family of my acquaintance, two little boys were taken ill at the same time of typhoid fever; the same symptoms, of the same severity, same Allopathic treatment. One of the children died, asking to eat, which was refused him, because the pulse was febrile. The other found by chance, some boiled chesnuts within his reach, which he seized with a trembling hand and swallowed with avidity; he became immediately convalescent. It is true that in the case of this little patient, as in that of whom I cited the case, in the course of this memoir, the cessation of the adynamy and the return of the digestive faculties, coincided with the first doses of Homœopathic remedies.

But in the desire to sustain the strength, we should be careful to avoid the use of those pre-

tended tonic substances, prescribed by the majority of physicians to this end, and which have no other result than to make them pass from a state of intempestive sur-excitation to a state of feebleness often incurable (F).

NOTES.

NOTE (A), PAGE 18.

INTERMITTENT fevers do not all assume, as is well known, the same character, and are not all susceptible of being cured by *Quinine*. Nevertheless the majority of Allopathic physicians make no attempt to distinguish the fevers which call for this medicine from those which require the use of another specific. They administer the febrifuge whenever they have an intermittent fever. But in the very numerous cases where Quinine does not suit, this substance developes its toxic effects. Seeing no curative result, the practitioner increases the dose, and with it the evil he produces. This fatal proceeding often changes, in a profound and durable manner, constitutions until then sound and vigorous, and brings on

those astheniæ, those dropsies, those enlargements of the spleen, those chronic gastrites, those congestions of the lower abdomen, almost always incurable, which are the so frequent result of the treatment of intermittent fevers by the old school of medicine.

NOTE (B), PAGE 30.

The multiplicity of indications to which bleeding is expected to respond, in the Allopathic school, is truly astonishing. Now it is the mass of the blood which must be diminished, then it is the orgasm which it is necessary to moderate. They depend upon it to prevent or dissipate congestions, to arrest hemorrhages, to dilute the too thick blood, to calm the pains, to allay the divers irritations which manifest themselves in the innumerable species of inflammatory affections. Upon the whole, if sanguine emissions do not embrace in themselves, the whole of the old therapeutics, they at least control to such a point as to reduce to a very secondary role all the other rational processes.

Allopathic physicians prescribe bleedings with a frightful levity; gum syrup, calming potions, bleed-

ing of several ounces, this is the commencement; and this latter part of the prescription is not founded upon any more serious or better understood reasons than the administration of anodynes. It would seem as if they supposed there could be no harm in taking blood, even when the indication was not positive, and one might permit themselves a great latitude. It is impossible to take too decided a stand against this fatal prejudice. What is the constant and positive effect of blood letting? Debilitation, depression of the forces, the prevention or moderation of the vital reaction. This positive action may, indeed, in some very rare cases, find its indication, but as in the treatment of affections called typhoid, it is essential to preserve all the energy of the reaction, bleeding must be the most irrational process, and the most opposed to the curative end proposed, it disarms the conservative principle and leaves the organism without defense.

The physician who has often recourse to the lancet, should always fear one of those false inflammatory states, one of those pernicious, typhoid, putrid dispositions, when the emission of blood is mortal, and which is only discovered too late.*

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* See Histoire de la Doctrine Médicale Homœopathique; Examen Critique des Médications Allopathiques, t. II., page 311.

NOTE (C), PAGE 42.

It cannot be denied that the revulsives are often useful; but these means, like all those which constitute the medicine of the school is much too generally employed. There is not a disease of any duration against which they do not employ a certain number of revulsives. It is the established mode of proceeding, which allows no exception; and he who dies without a blister, does not die according to the rules of art. In more tenacious and prolonged affections, they add the whole apparatus of setons, moxas, cauteries, salves, frictions of Tartar emetic, Croton oil, etc. They martyrize the patient in the most atrocious manner.

The multitudes who die under the action of this medical regimen do not complain, and the small number who think they have been benefited by it, or who survive their sufferings, serve to perpetuate this substitutive method, so blind and brutal.

The unseasonable employment of revulsives, or their excessive use, excites fever and solicits a continued reaction, under the influence of which the economy is enfeebled, exhausted, and must finally succumb. These results are very marked in all typhoid affections, and are to be dreaded in that

species of disease where the blood has, from the beginning, a great tendency to alteration, and when the reaction is readily followed by gangrene.

Revulsive medication, left to itself, without the intervention of specific agents, is totally powerless in the treatment of special affections; the most that it can ever do is to retard the fatal termination, in diminishing the irritation of the organic apparatus affected; even this result cannot be relied upon; for the very opposite is by no means rare. In placing ourselves at the Allopathic point of view, we confess that the revulsives may be useful in the commencement of inflammations, when it is not yet located, or when the localization is feeble and susceptible of easy displacement; if this is not the case, they risk, by their means, the increasing of the general reaction, and consequently the local phlogosis. Professor Trousseau goes further and says: "Whatever efforts they make by means of revulsives, to arrest the progress of a pneumonia, of a hepatitis, of a pustulous eruption of the skin, *they never succeed.**

* Histoire de la Doctrine Médicale Homœopathique. Vol II, page 324.

NOTE (D), PAGE 84.

"There is nothing more pernicious," says Etmuller, "than the use of purgatives in putrid fevers. Physicians should take good care then to abstain from the administration of any purgative during the course of this disease, especially upon the appearance of the petechiæ or spots; let them avoid any stimulants whatever, even of clysters or suppositories, in order not to interfere with the movements of nature." A great number of celebrated practitioners, among others, Hoffman, Stoll, Huxham, convinced of the danger of purgatives in putrid fevers, and even in every species of acute febrile disease, have entirely banished them from their practice, and recommend the greatest reserve in their use. But possibly, out of respect for the prejudices of their time, they do not take a sufficiently firm stand against this dangerous treatment, and prescribe it still, though very rarely, in cases where it is evidently hurtful.

In adynamic abdominal fevers, the digestive organs are the seat of an inflammation that purgatives, (all substances more or lese irritating), aggravate in the most fatal manner. They concentrate upon this feeble point the morbid activity, and ren-

der the salutary reaction impossible. Then appear all those phenomena which indicate a nervous abdominal congestion; chills, dryness of the skin, pulse concentrated, small, irregular, great depression, inextinguishable thirst, colliquative diarrhea, face hippocratic, petechiæ, and death. At other times, purgatives produce only abnormal symptoms. But in all cases, they trammel the progress of the disease, expose the patient to more or less danger, and retard, when they do not render impossible, the cure.

As evacuants, purgatives have only one useful application, which is for the expulsion from the digestive canal, of toxic, indigestible or indigested matter. For all other cases they are hurtful, and our school clearly proclaims it as one of the unexceptionable facts in medicine. At the same time, when, in consequence of a purely dynamic disturbance, there is formed in the digestive organs an accumulation of secreted matter, accompanied by a tendency to evacuation, by vomiting and purging, it is indicated as an aid to the natural tendencies. The same indication is presented when this state exists *sine materia*. This medication is then Homœopathic, as we are only called upon to assist the vital reaction. This is so evident, that the *vomitus vomitu curatur* is perhaps more ancient than Hip-

pocrates. Excepting in this case, the evacuation produced by purgatives is forced, and morbid, and can never be salutary in itself. The fluids expelled are the result of the irritation of the intestinal parietes, and not peccantes humors inclosed in the digestive tube. These evacuations are of no use, and are obstacles to the curative effort which nature herself would have made; for the purgative irritation dries up the mucous membrane, and renders still more tenacious the constipation it was intended to combat.

In general dropsies, or in dropsy of the abdomen, it is in vain that we solicit from the intestines a serous hypersecretion, we only bring on insufficient stools, accompanied with tenesmus, which increase the feebleness, the irritation, the hectic fever, and hasten the fatal termination.

We have so often witnessed this, that we feel it our duty to proclaim it aloud, but the rational indication appears so evident, that no account is kept of these daily deceptions by the advocates of this treatment, and they continue imperturbably in the same course.

Considered as revulsives, purgatives and vomitings have a real value, nevertheless, the Homœopathic system almost entirely proscribes them; first, because they interfere with the action of its

medical agents, and in the second place, because there is always a danger inherent to the irritation of the intestinal mucous, and the revulsion of the skin may fulfill all the indications if effected and managed with skill.

There are specific purgatives and vomits which are employed with success as special modifiers of the digestive organs. These means belong to the domain of Homœopathy. It is precisely upon the principle of likes that *tartre stibie* and *ipecacuanha* cure certain gastric difficulties, and that *Merc. cor.* succeeds against certain dysenteries.

NOTE (E), PAGE 90.

The appearance of Hydropathy is a very remarkable event in the medical history of modern times: it represents the first revolution produced in the rational school through the influence of Homœopathic ideas, the first systematic transformation of the old school into the new doctrine. Priesnitz presupposes Hahnemann. According to his partisans even, who have written upon his method, he would, perhaps, have done nothing without Hahnemann, his instinctive talent would have remained buried,

useless, lost, if he had not found a path traced by a vigorous arm through the inextricable maze of Allopathic systems. From this point of view, adopted by the greater part of German Hydropathic writers, and the only one which gives an exact idea of the origin and value of Hydropathy, it appears that some examination of this method should find place in this work. Hydropathy, according to the majority of its partisans, has its foundation, its reason, in the general fact of the reaction with which the living organism is provided. We seek, in exciting this reaction, to re-establish the energy of the vital manifestation, and by a particular insistance upon certain enfeebled appareils, to restore the equilibrium of the functions. If the vital force of the subject possessed its primitive vigor, such as nature bestowed upon the first generations, it is probable that, in a majority of cases, it would itself repulse the morbid influences, and would have no need of an auxiliary for curing. But, at this day, when life possesses hardly any of the energy of the earlier ages, it is necessary to come to its aid.

The Hydropathic processes have for their object, to excite the reactions to such a degree as to give acuteness to chronic states, and to aid in acute states the favorable crises and the salutary labor

of the Hippocratic digestion. No method procures more efficaciously these results; it is par excellence, the hygienic, physiologic medicine.

Between this method, and Homœopathy, there is in reality no opposition, rather indeed a correlation, a harmony. The only difference is in relation to the means and the process, and even the one being purely physiologic, does not in any way interfere with the special influences of medicinal substances.

Superabundant observation enables us to recognize how nearly the action of the Hydropathic processes approache to those of the Homœopathic remedies; that both produce curative aggravations; that they both favor the symptomatic development, and ameliorate the evolution of the disease which ripens before the time, as Attomyr would say, dries, withers, and dissipates.

The general excitation of cold water forces the disease to express itself, to show itself; and in assuming all its symptoms, it enables Homœopathy to exercise upon it the fullness of its action.

The activity impressed upon the functions of secretion and of excretion, expels foreign substances, delivers the economy from the infections of molecular medical substances, and thus removes one of the most fruitful causes of failure in Homœopathic treatment.

Thus we see that the two methods have multiplied relations of a high importance; they seem to complete each other, and to give each other, upon many points, a mutual support. It is thus that the German Homœopathists have understood it; our brethren, Frank of Osterode and Starke of Silberberg, among others, are indefatigable champions of the union of the two systems. But on this subject difficulties have arisen. It is asked, What is the relative value of the two methods, what is the sphere of action of this, and how far should that operate? The partisans of Priesnitz, for the most part, publish that Hydropathy is of general use, that it can cover in a definite manner the whole of the therapeutics, and only avails itself collaterally of the resources of specific medication. The Homœopathists return the proposition, and do not content themselves with the assertion, they assign the reason for it. Several among our brethren, among whom we distinguish Dr. Ott, of Mecklenburg, occupy themselves particularly in the determination of this question of practice. He has just issued a pamphlet on this subject in which he announces a work on the subject, *ex professo*.

Before giving our own observations upon this matter, I propose to report those of a practitioner of authority in our school, in Germany. We find

the following passages in an article upon Hydropathy by Dr. Kurtz (of Frankenstein, Silesie). *Journ. Hygea:*

"One great advantage which I recognize in Hydropathy is, that it lets nothing heterogeneous or toxic enter into the economy. I was struck in particular, with its high importance in the medicamental diathesis. I was by it led to observe how often, without knowing it, we have to deal with affections of this nature, and how precious is a method which either dissipates this affection, or gives notice of its presence. It is not of less importance in the other chronic diatheses. The many happy cures of such diseases, of which I have been witness, have often led me to think that Hydropathy was the realization of the idea that the ancient methodists had expressed by the term *recorporation* (recomposition).

"Every practitioner knows how difficult it often is, in individual cases of chronic disease, to determine the essential character of the malady. There is not one who has not seen over and over again, the medicine apparently the most clearly indicated, produce no effect, probably because it does not answer to the real nature of the disease, insufficiently manifested by the symptoms. Every one must then welcome with gratitude a process, during

the employment of which reappears, at least transiently, the primitive phenomena of the disease. The taking into consideration of these new observations, often suddenly renders the indications evident and the choice of the remedy easy.

In diseases extremely intense and malignant, where the curative tendency of nature threatens to succumb, there are no means equal to the Hydropathic, for exciting a free and efficacious reaction. Of such are, among others, the cases of Scarlatina, where, in consequence of the disappearance of the symptoms, formidable accidents occur; in croup, according to the experiences of the physicians of St. Petersburg; in typhus with loss of consciousness; in cholera (Attomyr cites the case of a cholera patient who was cured by throwing himself into a ditch full of water); but to obtain these results, the application must be energetic. He who employs it in self defense, who contents himself with a few cold lotions, or ice blisters, when he should envelop the whole body repeatedly in a wet sheet, or make use of the descending douche (Sturzbad), from five to ten minutes, when he should take cold baths of an hour's duration, during which the extremities should be vigorously rubbed by several persons, when this process alone can prove efficacious, let him not accuse the system of inefficacy.

The Hydropathic process, united to ours, possesses then incontestable and precious advantages; but isolated, left to itself, without the concurrence of our means, it assumes a character less curative than palliative, and partakes the inconveniences of all general applications, without descending to specialties. There are individual cases capable of reacting, but it remains necessarily powerless against a great number of special morbid states, where this faculty of reaction is profoundly altered.

This use of cold water, brings the reaction too strongly into play, in exciting beyond measure the functions of nutrition and excretion. Then it is evident that this redoublement of life can only be acquired at the expense of its duration. They fortify for the time, by drawing upon the future; for the treatments at Priesnitz are long; it is not uncommon to see them extend from six months to two or three years. It is a violent process of reaction against disease, which must in the end exhaust the economy, as a practitioner of Prague, Dr. Hirsch, assures me he has already many times observed. This method will always excite a general reaction, in which all the appareils, all the functions, are brought more or less into play, from which there results an enormous sur-excitation.

In order to act upon the affected part, the whole

organism must be violently shaken. It is a mistake for the exclusive hydropathist to dwell upon the calm of the circulation, which is in fact sometimes observed; for in the first place, the acceleration of the pulse is not a criterion of the degree of violence with which the economy is impressed; in the second place, the circulation is always accelerated in perspiration, proceeding from habitual use. Kurtz, in the cases of nine persons that he observed to this end, found that the average of pulsations exceeded ninety per minute. The faculty of reaction should be largely superabundant, otherwise its manifestations, if the treatment exacts that it should be for a long time provoked (in the chronic diathesis, in rheumatism, gout, etc.), exhaust the economy instead of curing it. In individuals who react with difficulty, by bringing into play all their forces, this excessive labor is always followed by a febrile state which exhausts life. Hydropathy must be entirely rejected in these cases.

We have sometimes seen grave accidents result from a simple application of wet compresses, applied according to the rules, but in cases of feeble and delicate persons. There are cases for the use of the *fumigating process*,* which spares the economy

* See T. Rapou, *Traité de la Méthode Fumagatoire ou de l'Emploi Médical des Bains et de Douches de Vapeur.* Paris, 1824.

the expense of the reaction. If it is followed by the varied application of cold water, we have all the resources of Hydropathy in vigorous subjects. The fumigating process, on this account, seems to me destined to have a great extension; it completes the system of Priesnitz, in rendering it applicable to all ages, to all temperaments, and to the divers pathological situations.

This useful combination is beginning to be effected. My father observed lately, in one of the numerous Hydropathic establishments, on the borders of the Rhine, that of Gleisweiler, a fumigating apparatus, that the directing physician, Schneider, used for provoking the expansive movement, and perspiration, in cases of persons enfeebled, or of a delicate constitution, and in cases where there is danger of provoking an internal fluxion. In fact, if one does not then proportion the means of action to the feeble resistance of the subject, the movement from without, within, or of concentration, persists, a veritable congestion takes place, and the patient may die suddenly. Giannini, whose mode (plunging the fever patients into cold water during the period of cold), used without the above-mentioned precautions, has furnished numerous examples of this. The Hydropathic processes solicit violently the general reaction; what a difference in the Homœ-

opathic mode! Here the pharmaceutic excitation is produced upon a determined appareil, by dynamic agents, which, having affinity but for this point, only claim from the organic ensemble a scarcely appreciable consensus. There is then but a feeble reaction, and only upon the required point (apart from the exceptional cases of aggravation); this reaction, although feeble in itself, is nevertheless energetic, with reference to therapeutics, because it is special. Hydropathy, to accomplish its objects, must shake the whole economy.

Another more serious inconvenience in the cold water treatment, is that of being compelled to depend too much upon accessory considerations, observation of details, not being able to resume the rules of practice in some general precepts sure and invariable, which may be applied without danger, after having devoted to its study a reasonable amount of time and attention. For in short, in medicine, there is a margin for *errare humanum est*, but in Hydropathy there is none. One may do irreparable injury if one is not useful; we may compromise life if we do not re-establish the health; all depends upon the *modus faciendi*. If the compresses are left long, the effect is antiphlogistic; renew them at certain intervals, we bring on an excitation.

The practice of this method consists essentially in these little details, where errors and inattentions necessarily occur, and excite grievous troubles through the importance of the reaction brought into play. The knowledge acquired by a long experience hardly suffices to enable one to avoid them; it requires that instinct, that genius for observation possessed in so high a degree by Vincent Priesnitz, which it is not given to all the world to acquire, and which caused it to be said to his pupils that his system would disappear with him. We would not go so far, but are of opinion that it will lose with its creator, its pretensions to be a general method, and that it will preserve, as an auxiliary to Homœopathy, all its claims to the esteem of practitioners.

NOTE (F), PAGE 93.

To strengthen, fortify the organism, is purely a physiological operation, which belongs to the domain of hygiene. To speak of a tonic, stimulating, fortifying medication is absurd, incomprehensible; for, evidently, tonics, par excellence, in diseases, are the remedies which cure.

A false application made to the patient of the properties of certain medicines upon the healthy man, has originated this pretended medication. Because, iron, quinine, bitters, mints, provoke in the normal state, a general excitation, a species of phlogosis, it has been concluded that these substances would be suitable for arousing the reaction in enfeebled patients. But this excitation adds nothing to the strength of the healthy man; it is simply a perturbation, and its employment upon patients is a vicious application of a gross analogy. But, it may be said, quinine, tannin, aromatics are *antiseptics*, they really exercise, then, a favorable action upon the preservation of life. Assuredly, if we apply these substances upon flesh threatened with gangrene, they may retard, or prevent it, by developing a certain degree of reaction. Red-hot iron would do better, and kitchen salt as well.

And how can it be thought that these substances, taken internally, and changed by the digestive and circulatory apparatus, can still preserve the properties of their physical and chemical constitution? Clinical experience has contradicted these preconceived opinions, and the adynamic fevers pursue without change their fatal progress under the action of bitters, of Polygala, and of diffusible excitants.

Since the discomfiture of Brousaism, the Allo

pathic school deceives anew with its pretended tonics, seeking in the transient and deceitful excitation which they procure, a remedy for the very real depression which they still too often produce by their sanguinary emissions,

The tonic power is a general property, which belongs to all agents under certain circumstances. What enfeebles in one case strengthens in another. We can no more say of medicines than of heat and cold, that they are tonic. This quality is inherent in no agent; and if anything can be established upon this subject, it is, that all medicines, well indicated, are strengthening, and *vice versa*. From this point of view, the *tonic medicine* of the old school would be much better denominated *medication debilitante*.

THE END.

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